

CALIFORNIA DEPARTMENT OF CHILD SUPPORT SERVICES

P.O. Box 419064, Rancho Cordova, CA 95741-9064



August 15, 2002

LCSA LETTER: 02-27

ALL IV-D DIRECTORS

SUBJECT: REVISED ADMINISTRATIVE EXPENSE CLAIM CS 356 SERIES AND TRAINING INFORMATION

Reason for this Transmittal

- State Law or Regulation Change
- Federal Law or Regulation Change
- Court Order or Settlement Change
- Clarification requested by One or More Counties
- Initiated by DCSS

The purpose of this letter is to provide further information to local child support agencies (LCSAs) regarding the revision of the Administrative Expense Claim (AEC) CS 356 Series. The Department of Child Support Services (DCSS) is issuing this information in order to further assist LCSAs with the transition from the current process of reporting administrative expenses to the new revised format. To help in this process, the web-based AEC CS 356 draft input document and instructions are attached, as well as information on the training to be provided by DCSS. LCSAs and staff planning to attend the training are encouraged to review the enclosed attachments prior to the training.

DCSS is required to develop uniform forms, policies, and procedures in specified areas to be employed statewide by all LCSAs. In the area of administrative reporting, it was determined that the AEC CS 356 series should be updated and simplified. LCSA Letter #02-16 dated June 5, 2002 was sent to all LCSA IV-D Directors along with information regarding the revision of the AEC CS 356 series and the new web-based process. LCSA Letter #02-16 also summarized major changes and provided draft output documents to help LCSAs become familiar with the reporting elements to assist in their expenditure data collection and administrative system modification efforts.

Beginning with the July-September 2002 quarter, quarterly expenditure reporting will become a web-based process. This procedure will be similar to the process developed for the annual CS 921 Budget Display information where submittal is electronic. LCSAs will receive user names, initial passwords, and instructions on how to log on to the DCSS County Website to enable submission of their expenditure data into the AEC CS 356 input document.

Attachments are enclosed to help in the transition to this new format. Attachment I provides the web-based AEC CS 356 input document. The AEC CS 356 input document was designed to emulate the CS 356 paper form as much as possible while utilizing advanced web design for a



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more user-friendly interface. Attachment II supplies instructions to help in the completion of the CS 356 input document.

The AEC CS 356 Training Registration Form is included as Attachment III. DCSS will be providing two separate training sessions to be held at DCSS in Sacramento and one in Orange County (specifics to be determined). Session A will be held at DCSS on September 11, 2002. Session B will be held at DCSS on September 18, 2002. The purpose of this training is to assist LCSAs with the new web-based claim submission process. LCSAs are encouraged to send all staff involved with the administrative claim process, however, due to limited seating, LCSAs are requested to limit the number of attendees to four people. **If you need to send additional staff, please contact Diane Muranaka at (916) 464-5282.** (Please note: an additional training session (Session C) is being planned in Orange County for the week of September 23, 2002. Once plans are finalized, DCSS will notify the LCSAs who are interested in attending the training session in Orange County.) Please fill out one registration form (Attachment III) for each attendee and return it to the address listed below no later than **August 28, 2002:**

California Department of Child Support Services
P.O. Box 419064
Rancho Cordova, CA 95741-9064
Attn: Diane Muranaka

If you prefer, you can fax your registration form to Diane Muranaka at fax number (916) 464-5214. Attachment IV provides each LCSA with their scheduled training session date. If you are unable to attend training on your assigned date, please contact Diane Muranaka at (916) 464-5282 or Ted Halverson at (916) 464-5085. Based on space availability, your request for rescheduling will be considered.

Attachment V provides a tentative agenda for the training. Attachment VI lists hotels located close to DCSS. A map to nearby restaurants is also provided for your convenience (Attachment VII). Any questions or concerns relating to the revised AEC CS 356 can be addressed to your County Allocations and Claims Policy Analyst or Linette Kleinsasser at (916) 464-5150 prior to the training.

Sincerely,

Annette Siler for
JAN SHERWOOD
Deputy Director
Administrative Services Division

Attachments (7)

Cc: David Oppenheim, Child Support Directors Association

[DCSS-AD-2002-CAC-0085](#)



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[DCSS Data Retrieval](#)

[CS356 AEC](#)

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CS356 AEC

DRAFT

John Doe from SampleLCSA

[CS 356.1](#) | [CS 356.2](#) | [CS 356.3](#) | [CS 356.4](#) | [CS 356.5](#) | [Adjustments](#) | [Audit](#)

LOCAL CHILD SUPPORT AGENCY ADMINISTRATIVE EXPENSE CLAIM SCHEDULE AND CERTIFICATION

Claim ID: 010902C01

Submitter: John Doe (000) 000-0000

LCSA: SampleLCSA

Submit Date: 7/30/2002

Quarter Ending: 9/30/2002

GRAND TOTAL LOCAL CHILD SUPPORT AGENCY EXPENSES

Cell 1

I. TOTAL PERSONNEL SERVICES EXPENSES (Non EDP)

Cell 2

II. OPERATING EXPENSES (Non EDP)

Cell 3

A. Facility Operations

Cell 4

1. Space

Cell 5

2. Other Facility Operations

Cell 6

B. Contractor Expenses

Cell 7

1. Payments to Other County Agencies

Cell 8

2. Other Contractor Expenses

Cell 9

C. Other Operating Expenses (Non EDP)

Cell 10

1. IRS Fees

Cell 11

2. All Other Operating Expenses (Non EDP)

Cell 12

III. TOTAL DIRECT SERVICES CONTRACTS (Non EDP)

Cell 13

IV. INDIRECT EXPENSES

Cell 14

A. Approved DA Indirect Cost

Cell 15%

Cell 16

B. Countywide Overhead (OMB A-87)

Cell 17

V. TOTAL EDP STAFF AND EDP EXPENSES

Cell 18

VI. LABORATORY EXPENSES

Cell 19

A. Laboratory Expenses

B. Operating Expenses

Cell 21

Cell 20

Cell 20

Cell 20

Cell 20

C. Laboratory Expenses Recovered

Cell 22

VII. ABATEMENTS

Cell 23

A. Interest

Cell 24

B. Misc. Program Income

Cell 25

VIII. HEALTH INSURANCE AND PERFORMANCE INCENTIVE EXPENSES

Cell 26

A. Health Insurance Incentive Funds

Cell 27

B. Performance Incentive Funds

Cell 28

California Home		Wednesday, July 31, 2002																													
Welcome to the				California Department of Child Support Services		County Website																									
DCSS County Website		CS356 AEC		DRAFT																											
DCSS Data Retrieval		John Doe entering claim for SampleLCSA																													
CS356 AEC		CS 356.1 CS 356.2 CS 356.3 CS 356.4 CS 356.5 Adjustments Audit																													
CS356 AEC Instructions		LOCAL CHILD SUPPORT AGENCY EXPENSE DISTRIBUTION TOTAL ALLOCABLE AND DIRECT COSTS NON EDP																													
Change Password		Claim ID: 010902C01		LCSA: SampleLCSA																											
Contact Us		Submitter: <u>John Doe</u> (000) 000-0000		Submit Date: 7/30/2002		Quarter Ending: 9/30/2002																									
Log Out																															
Update Field Table		FEDERALLY ELIGIBLE EXPENSES																													
Eligible Expenses		<table border="1"> <thead> <tr> <th></th> <th>Personnel Services Expenses</th> <th>Ratios</th> <th>Direct Operating Expenses</th> <th>Allocable Operating Expenses</th> <th>Indirect Expenses</th> <th>Direct Services Contracts</th> <th>TOTAL</th> </tr> </thead> <tbody> <tr> <td>Cell 57</td> <td>Cell 58</td> <td>Cell 60</td> <td>Cell 62</td> <td>Cell 64</td> <td>Cell 66</td> <td>Cell 68</td> <td>Cell 70</td> </tr> <tr> <td style="text-align: right;">Subtotals</td> <td>Cell 59</td> <td>Cell 61</td> <td>Cell 63</td> <td>Cell 65</td> <td>Cell 67</td> <td>Cell 69</td> <td>Cell 71</td> </tr> </tbody> </table>							Personnel Services Expenses	Ratios	Direct Operating Expenses	Allocable Operating Expenses	Indirect Expenses	Direct Services Contracts	TOTAL	Cell 57	Cell 58	Cell 60	Cell 62	Cell 64	Cell 66	Cell 68	Cell 70	Subtotals	Cell 59	Cell 61	Cell 63	Cell 65	Cell 67	Cell 69	Cell 71
	Personnel Services Expenses	Ratios	Direct Operating Expenses	Allocable Operating Expenses	Indirect Expenses	Direct Services Contracts	TOTAL																								
Cell 57	Cell 58	Cell 60	Cell 62	Cell 64	Cell 66	Cell 68	Cell 70																								
Subtotals	Cell 59	Cell 61	Cell 63	Cell 65	Cell 67	Cell 69	Cell 71																								
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	Personnel Services Expenses	Ratios	Direct Operating Expenses	Allocable Operating Expenses	Indirect Expenses	Direct Services Contracts	TOTAL																								
Cell 72	Cell 73	Cell 75	Cell 77	Cell 79	Cell 81	Cell 83	Cell 85																								
Subtotals	Cell 74	Cell 76	Cell 78	Cell 80	Cell 82	Cell 84	Cell 86																								
Approved ICRP		GRAND TOTALS																													
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CS356 AEC

DRAFT

John Doe entering claim for SampleLCSA

[CS 356.1](#) | [CS 356.2](#) | [CS 356.3](#) | [CS 356.4](#) | [CS 356.5](#) | [Adjustments](#) | [Audit](#)

EDP EXPENSES DISTRIBUTION

Claim ID:	010902C01	LCSA:	SampleLCSA
Submitter:	John Doe (000) 000-0000	Quarter Ending:	9/30/2002
Submit Date:	7/30/2002		

Account Number	Project Name	Total EDP Costs
<input type="text" value="Cell 94"/>	<input type="text" value="Cell 94"/>	<input type="text" value="Cell 94"/>
<input type="text" value="Cell 94"/>	<input type="text" value="Cell 94"/>	<input type="text" value="Cell 94"/>
<input type="text" value="Cell 94"/>	<input type="text" value="Cell 94"/>	<input type="text" value="Cell 94"/>
	Other Child Support	<input type="text" value="Cell 95"/>
	Non Federally Eligible Expenses	<input type="text" value="Cell 96"/>
	Grand Total	<input type="text" value="Cell 97"/>

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CS356 AEC

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John Doe entering claim for SampleLCSA

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TOTAL CHILD SUPPORT AGENCY DISTRIBUTION REPORT OF TOTAL EXPENSES

Claim ID: 010902C01
Submitter: John Doe (000) 000-0000 **LCSA:** SampleLCSA
Submit Date: 7/30/2002 **Quarter Ending:** 9/30/2002

ACTIVITIES				TOTAL	FEDERAL	STATE	COUNTY
A. Federally Eligible EDP Expenses							
	Federal	State	County				
1. EDP - R1	66%	34%	0%	\$0			
2. EDP - R2	66%	34%	0%				
3. Subtotal Federally Eligible EDP Expenses							
B. Non Federally Eligible EDP Expenses							
	Federal	State	County				
1. EDP - R8	0%	100%	0%	\$0		\$0	
2. EDP - R9	0%	100%	0%	\$0		\$0	
3. EDP - R10	0%	0%	100%	\$0			\$0
4. Non Federal Eligible Expenses (0-0-100)				\$0			\$0
5. Subtotal Non Federally Eligible EDP Expenses				\$0		\$0	\$0
TOTAL EDP EXPENSES							
C. Federally Eligible Expenses							
1. Child Support Functions (66-34-0)							
2. Subtotal Federally Eligible Expenses							
D. Laboratory Expenses (90-10-0)							
E. Abatements (66-0-34)							
F. Health Insurance & Performance Incentive Expenses (66-0-34)							
G. Subtotal Federally Eligible Expenses				Cell 98	\$0		\$0
H. Non Federally Eligible Expenses							
1. Child Support Disregard (0-0-100)							
2. Subtotal Non Federally Eligible Expenses							
I. Health Insurance & Performance Incentive Expenses				Cell 99			\$0
J. Subtotal Non Federally Eligible Expenses					\$0	\$0	
K. GRAND TOTAL				Cell 100	\$0	\$0	\$0

Subject to Admin Allocation Cell 101

**LOCAL CHILD SUPPORT AGENCY ADMINISTRATIVE EXPENSE CLAIM SCHEDULE AND CERTIFICATION ON
INPUT DOCUMENT INSTRUCTIONS
CS 356.1**

DRAFT

The objective of the Administrative Expense Claim (AEC) is to assist the Department of Child Support Services (DCSS) and each of the Local Child Support Agencies (LCSA) in the claiming of federally eligible administrative costs. LCSAs are directed to use the following instructions in completion of the AEC.

Input Cell Reference	Instructions
Grand Total Local Child Support Agency Expenses Cell: 1	NO ENTRY. Automatically calculated. Sum of I through VIII. This represents the total cost of the LCSA program for the quarter. Must equal the CS 356.5, K., Grand Total, Cell 100.
I. Total Personnel Services Expenses (Non EDP) Cell: 2	Enter salaries and benefits for all Non EDP staff. (See personnel services definitions). Must equal the CS 356.2, Total Personnel Services Expenses, Cell 56.
II. Operating Expenses (Non EDP) Cell: 3	NO ENTRY. Automatically calculated. Sum of Cells 4, 7, and 10. Total LCSA program operating costs.
II. A. Operating Expenses (Non EDP) Facility Operations Cell: 4	NO ENTRY. Automatically calculated. Sum of Cells 5 and 6.
II. A.1. Facility Operations Space Cell: 5	Enter expenses specifically associated with the cost of the facility such as, rents and leases. Please note: County owned space is reported in A-87, Cell 17.
II. A. 2. Facility Operations Other Facility Operations Cell: 6	Enter expenses not specifically associated with the cost of rents and leases such as, utilities, maintenance, janitorial, repairs and alterations, etc.
II. B. Contractor Expenses Cell: 7	NO ENTRY. Automatically calculated. Sum of Cells 8 and 9.
II. B.1. Contractor Expenses Payments to Other County Agencies Cell: 8	Enter all contractor expense payments to other county agencies. (Non EDP)
II. B. 2. Contractor Expenses Other Contractor Expenses Cell: 9	Enter the costs associated with contracts with public and private agencies not included in Cell 8 and not associated with direct services contracts as defined in Cell 13. (Non EDP)
II. C. Other Operating Expenses Cell: 10	NO ENTRY. Automatically calculated. Sum of Cells 11 and 12.
II. C.1. Other Operating Expenses IRS Fees Cell: 11	Enter the Financial Management Services (FMS) fee portion of IRS Tax Intercepts paid to custodial parties during the reporting quarter.
II. C.2. Other Operating Expenses All Other Operating Expenses Cell: 12	Enter all remaining costs associated with general operations not listed in Cells 4 and 7. Do not include IRS Fees.

**LOCAL CHILD SUPPORT AGENCY ADMINISTRATIVE EXPENSE CLAIM SCHEDULE AND CERTIFICATION
INPUT DOCUMENT INSTRUCTIONS
CS 356.1**

Input Cell Reference	Instructions
III. Total Direct Services Contracts (Non EDP) Cell: 13	NO ENTRY. Automatically calculated. Total Direct Services Contracts costs from CS 356.3, Cell 92.
IV. Indirect Expenses Cell: 14	NO ENTRY. Automatically calculated. Sum of Cells 16 and 17.
IV. A. Indirect Expenses Approved DA Indirect Cost Rate Percent Cell: 15	Enter the approved indirect cost rate percentage as approved through the Indirect Cost Rate Proposal (ICRP) process by DCSS. (Not applicable after 9/30/02).
IV. A. Indirect Expenses Approved DA Indirect Cost Cell: 16	Enter the cost of indirect expenses by multiplying the indirect cost rate percentage by the personnel services expenses for the number of applicable months in the report period. (Not applicable after 9/30/02).
IV. B. Indirect Expenses Countywide Overhead (OMB A-87) Cell: 17	Enter the expenses paid by the county as overhead in accordance with the Countywide Cost Allocation Plan (A-87) approved by the State Controller's Office.
V. Total EDP Staff and EDP Expenses Cell: 18	NO ENTRY. Total EDP costs from CS 356.4, Cell 97.
VI. Laboratory Expenses Cell: 19	NO ENTRY. Automatically calculated. Cell 21 minus Cell 22.
VI. A. Individual Laboratory Individual Laboratory Operating Expenses (Itemize) Cell: 20	Enter the name of the laboratory (vendor) from which services were received and applicable expense.
VI. B. Laboratory Operating Expenses Cell: 21	NO ENTRY. Automatically calculated. Sum of individual Laboratory Expenses listed in Cell 20.
VI. C. Laboratory Expenses Recovered Cell: 22	Enter the amount of laboratory costs redeemed. Input the entry as a positive number.
VII. Abatements Cell: 23	NO ENTRY. Automatically calculated. Sum of Cells 24 and 25.
VII. A. Abatements Interest Cell: 24	Enter the amount of interest earned from financial institutions and/or interest earned on undistributed collections. Input the entry as a positive number.
VII. B. Abatements Misc. Program Income Cell: 25	Enter any remaining costs recovered. Input the entry as a positive number.

**LOCAL CHILD SUPPORT AGENCY ADMINISTRATIVE EXPENSE CLAIM SCHEDULE AND CERTIFICATION
INPUT DOCUMENT INSTRUCTIONS
CS 356.1**

Input Cell Reference	Instructions
VIII. Total Health Insurance and Performance Incentive Expenses Cell: 26	NO ENTRY. Automatically calculated. Sum of Cells 27 and 28.
VIII. A. Health Insurance Incentive Funds Cell: 27	Enter expenditures for which Health Insurance Incentive Funds were used.
VIII. B. Performance Incentive Funds Cell: 28	Enter expenditures for which Performance Incentive Funds were used.

**LOCAL CHILD SUPPORT AGENCY PERSONNEL SERVICES EXPENSES DISTRIBUTION (NON EDP)
INPUT DOCUMENT INSTRUCTIONS
CS 356.2**

Input Cell Reference	Instructions
Federally Eligible Expenses Child Support Functions Partners for Fragile Families (only if applicable) Additional Direct Personnel Services Expenses Cell: 29	Click on the arrow for drop-down options. Select applicable function(s). Additional entries must be approved and added by DCSS. In order to make an additional entry into the blank drop-down selection box, please contact the County Allocations and Claims Policy Team analyst for your county. If approved, the name of this category will appear and cost data can then be entered in Cell 30.
Federally Eligible Expenses Direct Personnel Services Expenses Cell: 30	Based on LCSA time certifications, enter all Non EDP salaries and benefits that can be directly identified to functions identified in Cell 29.
Federally Eligible Expenses Direct Personnel Services Expenses Subtotal Cell: 31	NO ENTRY. Automatically calculated. Sum of Direct Personnel Services Expenses listed in Cell 30.
Federally Eligible Expenses Time Study Hours Cell: 32	Enter the number of hours as time studied to Child Support Functions or other functions listed in Cell 29, as applicable.
Federally Eligible Expenses Time Study Hours Subtotal Cell: 33	NO ENTRY. Automatically calculated. Sum of Time Study Hours listed in Cell 32.
Federally Eligible Expenses Ratios Cell: 34	NO ENTRY. Automatically calculated. Percentage of hours spent per function to total time study hours.
Federally Eligible Expenses Ratios Subtotal Cell: 35	NO ENTRY. Automatically calculated. Sum of Ratios listed in Cell 34.
Federally Eligible Expenses Allocable Personnel Services Expenses Cell: 36	NO ENTRY. Automatically calculated. These numbers are calculated by multiplying Cell 52 (Grand Total Remaining Personnel Services Expenses) by the ratios in Cell 34, as applicable.
Federally Eligible Expenses Allocable Personnel Services Expenses Subtotal Cell: 37	NO ENTRY. Automatically calculated. Sum of Allocable Personnel Services Expenses listed in Cell 36.
Federally Eligible Expenses Total Personnel Services Expenses Cell: 38	NO ENTRY. Automatically calculated. Sum of Cells 30 and 36.
Federally Eligible Expenses Total Personnel Services Expenses Subtotal Cell: 39	NO ENTRY. Automatically calculated. Sum of Total Personnel Services Expenses listed in Cell 38.

**LOCAL CHILD SUPPORT AGENCY PERSONNEL SERVICES EXPENSES DISTRIBUTION (NON EDP)
INPUT DOCUMENT INSTRUCTIONS
CS 356.2**

Input Cell Reference	Instructions
Non Federally Eligible Expenses Child Support Disregard Additional Direct Personnel Services Expenses Cell: 40	This cell relates to activities not eligible for federal funding, such as Child Support Disregard. Examples of Child Support Disregard functions include, but are not limited to, issuing disregard payments, issuing notices, and responding to disregard inquiries. Click on the arrow for drop-down options. Select applicable function(s). Additional entries must be approved and added by DCSS. In order to make an additional entry into the blank drop-down selection box, please contact the County Allocations and Claims Policy Team analyst for your county. If approved, the name of this category will appear and cost data can then be entered in Cell 41.
Non Federally Eligible Expenses Direct Personnel Services Expenses Cell: 41	Based on LCSA time certifications, enter all non EDP salaries and benefits that can be directly identified to entries made in Cell 40.
Non Federally Eligible Expenses Direct Personnel Services Expenses Subtotal Cell: 42	NO ENTRY. Automatically calculated. Sum of Direct Personnel Services Expenses listed in Cell 41.
Non Federally Eligible Expenses Child Support Disregard Additional Personnel Expenses Time Study Hours Cell: 43	Enter the number of hours as time studied to the function(s) listed in Cell 40, as applicable.
Non Federally Eligible Expenses Time Study Hours Subtotal Cell: 44	NO ENTRY. Automatically calculated. Sum of Time Study Hours listed in Cell 43.
Non Federally Eligible Expenses Ratios Cell: 45	NO ENTRY. Automatically calculated. Percentage of hours spent per function to total time study hours.
Non Federally Eligible Expenses Ratios Subtotal Cell: 46	NO ENTRY. Automatically calculated. Sum of Ratios listed in Cell 45.
Non Federally Eligible Expenses Allocable Personnel Services Expenses Cell: 47	NO ENTRY. Automatically calculated. These numbers are calculated by multiplying Cell 52 (Grand Total Remaining Personnel Services Expenses) by the ratios in Cell 45, as applicable.
Non Federally Eligible Expenses Allocable Personnel Services Expenses Subtotal Cell: 48	NO ENTRY. Automatically calculated. Sum of Allocable Personnel Services Expenses listed in Cell 47.
Non Federally Eligible Expenses Total Personnel Services Expenses Cell: 49	NO ENTRY. Automatically calculated. These numbers represent the sum of Cells 41 and 47.
Non Federally Eligible Expenses Total Personnel Services Expenses Subtotal Cell: 50	NO ENTRY. Automatically calculated. Sum of Total Personnel Services Expenses listed in Cell 49.

**LOCAL CHILD SUPPORT AGENCY PERSONNEL SERVICES EXPENSES DISTRIBUTION (NON EDP)
INPUT DOCUMENT INSTRUCTIONS
CS 356.2**

Input Cell Reference	Instructions
Grand Totals Direct Personnel Services Expenses Cell: 51	NO ENTRY. Automatically calculated. Total Direct Personnel Services Expenses during the report period. Sum of cells 31 and 42.
Grand Totals Remaining Personnel Services Expenses Cell: 52	NO ENTRY. Automatically calculated. All Non EDP salaries and benefits that cannot be directly identified to a specific function. This number is calculated by subtracting CS 356.2, Cell 51 (Grand Total Direct Personnel Services Expenses) from CS 356.1, I., Cell 2 (Total Personnel Services Expenses).
Grand Totals Time Study Cell: 53	NO ENTRY. Automatically calculated. Total hours time studied during the report period. Sum of Cells 33 and 44.
Grand Totals Ratios Cell: 54	NO ENTRY. Automatically calculated. Must equal 100 percent. Sum of Cells 35 and 46.
Grand Totals Allocable Personnel Services Cell: 55	NO ENTRY. Automatically calculated. Total Allowable Personnel Services during the report period. Sum of Cells 37 and 48.
Grand Totals Total Personnel Services Expenses Cell: 56	NO ENTRY. Automatically calculated. This equals all personnel services expenses for the quarter. Sum of Cells 39 and 50. This total must equal CS 356.1, I., Cell 2 (Total Personnel Services Expenses).

**LOCAL CHILD SUPPORT AGENCY EXPENSE DISTRIBUTION TOTAL ALLOCABLE AND DIRECT COSTS (NON EDP)
INPUT DOCUMENT INSTRUCTIONS
CS 356.3**

Input Cell Reference	Instructions
Federally Eligible Expenses Child Support Functions Partners for Fragile Families Cell: 57	NO ENTRY. Automatically entered from CS 356.2, Cell 29.
Federally Eligible Expenses Personnel Services Expenses Cell: 58	NO ENTRY. Automatically entered. These numbers are automatically entered from the CS 356.2, Total Personnel Services Expenses, Cell 38.
Federally Eligible Expenses Personnel Services Expenses Subtotal Cell: 59	NO ENTRY. Automatically calculated. Sum of Personnel Services Expenses listed in Cell 58.
Federally Eligible Expenses Personnel Services Expenses Ratios Cell: 60	NO ENTRY. Automatically calculated. Percentage of Personnel Services Expenses in each function to Total Personnel Services Expenses, Grand Total, CS 356.3, Cell 87.
Federally Eligible Expenses Personnel Services Expenses Ratios Subtotal Cell: 61	NO ENTRY. Automatically calculated. Sum of Ratios listed in Cell 60.
Federally Eligible Expenses Direct Operating Expenses Cell: 62	Enter operating expenses from the CS 356.1, II., Cell 3, that can be directly identified to the functions in CS 356.3, Cell 57, as applicable.
Federally Eligible Expenses Direct Operating Expenses Subtotal Cell: 63	NO ENTRY. Automatically calculated. Sum of Direct Operating Expenses listed in Cell 62.
Federally Eligible Expenses Allocable Operating Expenses Cell: 64	NO ENTRY. Automatically calculated. Ratios in Cell 60 multiplied by Cell 90.
Federally Eligible Expenses Allocable Operating Expenses Subtotal Cell: 65	NO ENTRY. Automatically calculated. Sum of Allocable Operating Expenses listed in Cell 64.
Federally Eligible Expenses Indirect Expenses Cell: 66	NO ENTRY. Automatically calculated. Ratios in Cell 60 multiplied by Cell 91.
Federally Eligible Expenses Indirect Expenses Subtotal Cell: 67	NO ENTRY. Automatically calculated. Sum of Indirect Expenses in Cell 66.
Federally Eligible Expenses Direct Services Contracts Cell: 68	Enter the amount of Direct Services Contracts that can be specifically identified to the functions in CS 356.3, Cell 57, as applicable.
Federally Eligible Expenses Direct Services Contracts Subtotal Cell: 69	NO ENTRY. Automatically calculated. Sum of Direct Services Contracts listed in Cell 68.

**LOCAL CHILD SUPPORT AGENCY EXPENSE DISTRIBUTION TOTAL ALLOCABLE AND DIRECT COSTS (NON EDP)
INPUT DOCUMENT INSTRUCTIONS
CS 356.3**

Input Cell Reference	Instructions
Federally Eligible Expenses Total Cell: 70	NO ENTRY. Automatically calculated. Sum of Cells 58, 62, 64, 66, and 68.
Total Federally Eligible Expenses Subtotal Cell: 71	NO ENTRY. Automatically calculated. Sum of total Federally Eligible Expenses listed in Cell 70.
Non Federally Eligible Expenses Additional Non Federally Eligible Expenses Child Support Disregard Cell: 72	NO ENTRY. Automatically entered from CS 356.2, Cell 40.
Non Federally Eligible Expenses Personnel Services Expenses Cell: 73	NO ENTRY. Automatically entered. These numbers are automatically entered from CS 356.2, Cell 49 (Total Personnel Services Expenses).
Non Federally Eligible Expenses Personnel Services Expenses Subtotal Cell: 74	NO ENTRY. Automatically calculated. Sum of Personnel Services Expenses listed in Cell 73.
Non Federally Eligible Expenses Ratios Cell: 75	NO ENTRY. Automatically calculated. Percentage of Personnel Services Expenses in each function to the CS 356.3, Cell 87 (Total Personnel Services Expenses, Grand Total).
Non Federally Eligible Expenses Ratios Subtotal Cell: 76	NO ENTRY. Automatically calculated. Sum of ratios listed in Cell 75.
Non Federally Eligible Expenses Direct Operating Expenses Cell: 77	Enter Operating Expenses from the CS 356.1, II., Cell 3, that can be specifically identified to the function(s) in Cell 72, as applicable.
Non Federally Eligible Expenses Direct Operating Expenses Subtotal Cell: 78	NO ENTRY. Automatically calculated. Sum of Direct Operating Expenses listed in Cell 77.
Non Federally Eligible Expenses Allocable Operating Expenses Cell: 79	NO ENTRY. Automatically calculated. Ratios in Cell 75 multiplied by Cell 90.
Non Federally Eligible Expenses Allocable Operating Expenses Subtotal Cell: 80	NO ENTRY. Automatically calculated. Sum of Allocable Operating Expenses listed in Cell 79.
Non Federally Eligible Expenses Indirect Expenses Cell: 81	NO ENTRY. Automatically calculated. Ratios in Cell 75 multiplied by Cell 91.
Non Federally Eligible Expenses Indirect Expenses Subtotal Cell: 82	NO ENTRY. Automatically calculated. Sum of Indirect Expenses listed in Cell 81.
Non Federally Eligible Expenses Direct Services Contracts Cell: 83	Enter the amount of Direct Services Contracts that can be specifically identified to the function(s) in Cell 72, as applicable.

**LOCAL CHILD SUPPORT AGENCY EXPENSE DISTRIBUTION TOTAL ALLOCABLE AND DIRECT COSTS (NON EDP)
INPUT DOCUMENT INSTRUCTIONS
CS 356.3**

Input Cell Reference	Instructions
Non Federally Eligible Expenses Direct Services Contracts Subtotal Cell: 84	NO ENTRY. Automatically calculated. Sum of Direct Services Contracts listed in Cell 83.
Total Non Federally Eligible Expenses Cell: 85	NO ENTRY. Automatically calculated. Sum of Cells 73, 77, 79, 81, and 83.
Total Non Federally Eligible Expenses Subtotal Cell: 86	NO ENTRY. Automatically calculated. Sum of total Non Federally Eligible Expenses listed in Cell 85.
Grand Totals Personnel Services Expenses Cell: 87	NO ENTRY. Automatically calculated. Sum of Cells 59 and 74.
Grand Totals Ratios Cell: 88	NO ENTRY. Automatically calculated. Must equal 100 percent. Sum of Cells 61 and 76.
Grand Totals Direct Operating Expenses Cell: 89	NO ENTRY. Automatically calculated. Sum of Cells 63 and 78.
Grand Totals Allocable Operating Expenses Cell: 90	NO ENTRY. Automatically calculated. Result of CS 356.1, Cell 3 (Operating Expenses) minus CS 356.3, Cell 89 (Direct Operating Expenses).
Grand Totals Indirect Expenses Cell: 91	NO ENTRY. Automatically entered from CS 356.1, Cell 14 (Indirect Expenses).
Grand Totals Direct Services Contracts Cell: 92	NO ENTRY. Automatically calculated. Sum of Cells 69 and 84.
Grand Totals Total of Federally Eligible and Non Federally Eligible Expenses Cell: 93	NO ENTRY. Automatically calculated. Sum of Cells 71 and 86. Must equal the sum of Cells 87, 89, 90, 91, and 92.

**LOCAL CHILD SUPPORT AGENCY EDP EXPENSES DISTRIBUTION
INPUT DOCUMENT INSTRUCTIONS
CS 356.4**

Input Cell Reference	Instructions
Account Number and Project Name	NO ENTRY. The Account Number and Project Name are automatically entered based on the approval letter provided by the DCSS Automation Branch.
Total EDP Costs Cell: 94	Enter the costs associated with the EDP project by Account Number and Project Name.
Other Child Support Cell: 95	Enter Other Child Support activity costs. Expenses for an EDP employee's time spent on administrative activities, such as casework, would be an example of other child support activity costs.
Total EDP Costs Non Federally Eligible Expenses Cell: 96	Enter EDP costs not eligible for federal funding.
Grand Total Cell: 97	NO ENTRY. Automatically calculated. Sum of Cells 94, 95, and 96.

**LOCAL CHILD SUPPORT AGENCY DISTRIBUTION REPORT OF TOTAL EXPENSES
INPUT DOCUMENT INSTRUCTIONS
CS 356.5**

The majority of the entries on this page are automatically calculated from previous pages and distributed to the appropriate funding source for EDP administrative expenses and Non EDP expenses. Cells that require input and clarification are indicated below.

Input Cell Reference	Instructions
F. Federally Eligible Expenses Health Insurance and Performance Incentive Expenses Cell: 98	Enter the expenses for which Health Insurance and Performance Incentive funds were used that are eligible for federal funding.
I. Non Federally Eligible Expenses Health Insurance and Performance Incentive Expenses Cell: 99	Enter the expenses for which Health Insurance and Performance Incentive funds were used that are not eligible for federal funding.
K. Grand Total Cell: 100	NO ENTRY. Automatically calculated. These numbers represent the total LCSA expenditures for the report quarter.
Subject to Administrative Allocation Cell: 101	NO ENTRY. Automatically calculated. This number represents the sum of federally eligible expenses (CS 356.5, C.1. + D. minus E.) that will be charged against the LCSA's non EDP administrative allocation.

REGISTRATION FORM

ADMINISTRATIVE EXPENSE CLAIM CS 356 TRAINING

RETURN COMPLETED FORM NO LATER THAN <i>AUGUST 28, 2002</i> TO:			
State of California Department of Child Support Services P.O. Box 419064 Rancho Cordova, CA 95741-9064 Attn: Diane Muranaka (916) 464-5282 Email address: Diane.Muranaka@DCSS.ca.gov		Please see Attachment IV for assigned training session date. (Please Note: LCSAs are encouraged to limit the number of staff attending the training to three people, with a maximum of four.)	
SECTION I	PARTICIPANT INFORMATION	PLEASE PRINT OR TYPE	
<i>Please note: Each attendee must complete a registration form.</i>			
Name	Last Name, First Name	Telephone Number ()	
Title		Fax Number ()	
LCSA		Email Address:	
Address			
City, State, Zip			
SECTION II	TRAINING INFORMATION		
<p>The 356 Child Support expenditure schedule and certification (CS 356 claim series) has been revised and updated. In order to simplify the process and procedure in submitting the quarterly claim, a web-based process was established to begin reporting with the July - September 2002 quarter.</p> <p>This training is to provide the local child support agency (LCSA) with the changes and updates. Training is recommended for AEC CS 356 users and staff responsible for the completion, review, and approval of the CS 356 claim.</p>			
	Session A.	Session B.	Session C.
Date:	September 11, 2002	September 18, 2002	September 25, 2002
Time:	9:00 am to 4:30 pm	9:00 am to 4:30 pm	9:00 am to 4:30 pm
Location:	Department of Child Support Services 2nd Floor Rooms 3023, 3024, 3025 Rancho Cordova, CA	Department of Child Support Services 2nd Floor Rooms 3023, 3024, 3025 Rancho Cordova, CA	Orange Co. Dept. of Child Support Services 1055 N. Main Street Training Room Santa Ana, CA 92701
<p>Please provide us with an advance notice of any accomodation needs that are required. Please indicate below if sound amplification or sign language interpreters are required. For persons with orthopedic impairment, please specify the nature of what is needed to accommodate you.</p> <p>Parking is available surrounding the office building.</p>			
<p>Please return this registration form by <i>August 28, 2002</i>. If you have any questions or can not attend the session that has been assigned, please contact Ted Halverson at (916) 464-5085 or Diane Muranaka at (916) 464-5282.</p> <p>* Please note: If you do not receive a confirmation on your registration by August 30, 2002 please contact Ted Halverson (916) 464-5085 or Diane Muranaka (916) 464-5282.</p>			

**ADMINISTRATIVE EXPENSE CLAIM CS 35€
TRAINING**

SESSION A. September 11, 2002	SESSION B. September 18, 2002	SESSION C. September 25, 2002
LCSA	LCSA	LCSA
<p align="center"> Central Sierra Colusa Del Norte Inyo El Dorado Glenn Humboldt Lassen Madera Marin Mariposa Mendocino Napa Plumas San Benito Sierra Nevada Siskiyou/Modoc Solano Sonoma Sutter Tehama Trinity Tuolumne </p>	<p align="center"> Alameda Butte Contra Costa Fresno Kern Kings Lake Merced Mono Monterey Placer Sacramento San Francisco San Joaquin San Luis Obispo San Mateo Santa Clara Santa Cruz Shasta Stanislaus Tulare Yolo Yuba </p>	<p align="center"> Imperial Los Angeles Orange Riverside Santa Barbara San Bernardino San Diego Ventura San Diego </p>

Department of Child Support Services
Administrative Expense Claim CS 356 Training
September 11 and 18, 2002
Training Room 3025

Sessions A and B

AGENDA

- **Opening Remarks** Linette Kleinsasser
 - Welcome
 - Housekeeping

- **Introduction** Linette Kleinsasser
 - Analysts & Trainers (Ted Halverson, Diane Muranaka, Cindy Walker, Deborah Wolfe)
 - LCSA Attendees
 - Agenda
 - Handouts

- **Overview of Administrative Expense Claim**
 - Why Do We Need It?
 - Let's Make a Change
 - Goals for Revision
 - Major Changes

- **Break**

- **Time Studies/Time Certification**

- **Website**
 - Access to the Website
 - Input Process

- **Lunch (On your own)**

- **Claim-Input Document**
 - Document
 - Instructions

- **Break**

- **Claim-Output Document**
 - Mechanics

- **CONCLUSION**

HOTELS

Holiday Inn
11131 Folsom Blvd.
Rancho Cordova, CA
(916) 638-1111

Guest Suites Bishop Court
3441 Data Drive
Rancho Cordova, CA
(916) 358-9299

Best Western Inn
11269 Pt. East Drive
Rancho Cordova, Ca
(916) 635-4040

Residence Inn
2779 Prospect Park Drive
Rancho Cordova, CA
(916) 851-1550

Hampton Inn
10755 Gold Center Drive
Rancho Cordova, CA
(916) 638-4800

Days Inn
10800 Olson Drive
Rancho Cordova, CA
(916) 638-2500

Extended Stayamerica
10721 White Rock Road
Rancho Cordova, CA
(916) 635-2363

Amerisuites Rancho Cordova
10744 Gold Center Drive
Rancho Cordova, CA
(916) 358-9299

Sheraton
11211 Pt. East Drive
Rancho Cordova, CA
(916) 638-1100

Hallmark Suites
11260 Pt. East Drive
Rancho Cordova, CA
(916) 638-4141

Fairfield Inn
10713 White Rock Road
Rancho Cordova, CA
(916) 631-7500

Courtyard by Marriotts
10683 White Rock Road
Rancho Cordova, Ca
(916) 638-3800

Motel 6
10694 Olson Drive
Rancho Cordova, CA
(916) 635-8784

Crossland Economy Studios
11299 Pt. East Drive
Rancho Cordova, CA
(916) 859-0280

