

## Appendix A2

### WIC Local Agency Web Survey

#### Exhibit 1: Agency Login



Welcome to the WIC NSA Cost Collection Instrument.  
Please log in using the username and password that was provided to you via email.

**Agency Login**

Username:  Password:

Change Password

**Need help logging in?**  
Click on the link above to send an email for help. Please include your username in the e-mail text, describe the problem you are having with the Login screen, and send the e-mail to the address indicated. For other questions or concerns, please contact the help desk at RTI International by email ([XXX@rti.org](mailto:XXX@rti.org)) or by phone at 1-800-XXX-XXX.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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## Exhibit 2: Home Screen

Home Agency Information Survey Questions ▼ Agency Costing Tool ▼ Cost Reduction Strategies Confirmation Logout iowa

Welcome to the WIC NSA Cost Collection Instrument.

### WIC Local Agency Survey

Thank you for participating in the Nutrition Services and Administration (NSA) Cost Study, sponsored by U.S. Department of Agriculture's Food & Nutrition Service (FNS) and administered by Altarum Institute and RTI International.

This survey, along with a similar one at WIC State agencies, seeks to understand the various ways NSA grant funds are utilized and how the NSA grant funds have been affected by the numerous program changes of the past decade. Overall, this study will be useful in informing decision-makers about the full range of valuable services that are performed with WIC NSA funds. Please refer to the accompanying email for full details of the research effort.

You can navigate through the survey using the menu above. The web survey is self-guiding and has a Help menu should you encounter difficulties. We recommend that you use the [User's Guide](#) which contains survey screen shots and more detailed instructions about how to complete the survey. If you need assistance accessing the survey, entering responses, or answering questions, you can call the RTI toll-free survey help line at 1-800-xxx-xxxx, which is available Monday-Friday from 9 a.m. to 7 p.m. EST.

The survey is estimated to take 60 minutes to complete.

Please navigate through the WIC NSA cost collection instrument screens using the menu buttons located on top of the screen and review and/or enter the required information. Clicking on the Confirmation button will confirm that you have entered all information on that screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time. You may exit and return to this survey at any time. After completing each page, please confirm your information to ensure that none of your entries are lost.

There is a space for additional comments at the very end.

#### You are logged in with:

username: iowa

agency: Local Agency



Please click on the dictionary icon to access the User's Guide.

## Exhibit 3: Agency Information Screen

### Agency Information

You are logged in as Local Agency

Below is information obtained from FNS and your state WIC agency for your FFY 2013 NSA grant. Please review these numbers and make any corrections.

- 
1. FFY 2013 Final NSA Allocation, including operational adjustment (OA) funds \$
  2. FFY 2013 Final NSA Closeout Expenditures \$
  3. FFY 2013 Closeout Expenditures reported by FNS 798-A Categories
    - a. Program Management \$
    - b. Client Services \$
    - c. Nutrition Education \$
    - d. Breastfeeding \$

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

**Agency:** Local Agency

**Contact Name:**

Please contact the help desk at RTI International by e-mail ([XXX@rti.org](mailto:XXX@rti.org)) or by phone at 1-800-XXX-XXX if you have any questions or concerns.

## Survey Questions

### Exhibit 4: Demographic Questions screen

Home Agency Information Survey Questions ▼ Agency Costing Tool ▼ Cost Reduction Strategies Confirmation Logout Iowa

### Questions About Program Demographics

Please confirm

Please respond to the following demographic questions about your agency.  
You can answer each question by selecting the correct radio button/box or by indicating *Other* and providing an explanation in the text box as appropriate.  
When finished, click Confirm and then navigate to the next screen.

1. Is your local agency a stand-alone WIC provider with no other services, or part of a sponsoring agency that provides services other than WIC?

- We are part of a sponsoring agency that provides more services than just WIC
- Our agency only provides WIC services

2. Which of the following would best describe your agency?

- City or county health department or agency
- State health agency
- Nonprofit WIC-only agency
- Private, nonprofit community health care agency
- Tribal, health care or social service agency
- Private, nonprofit social service agency
- Hospital
- Other (Describe)

3. Which other services does your sponsoring agency provide to families in your community? (Check all that apply.)

- Primary care medical services
- Dental services
- Immunizations
- Screenings (e.g., vision, hearing, lead, or other environmental screenings)
- Prenatal care
- Well-child exams
- Mental health services
- Family planning
- Childcare/parenting support
- Substance abuse or smoking cessation counseling
- Home heating or weatherization support
- Food bank/food pantry services
- Other medical services
- Other social services

4. Does your sponsoring agency provide clients support with completing applications for other public assistance, such as Medicaid, TANF, or SNAP?

- Yes
- No

5. Does the WIC program share the cost of staff or facilities with other programs providing services in your sponsoring agency?

- Yes
- No

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

## Exhibit 5: Services Provided Questions Screen

### Questions About the Services Provided

Please confirm

Now we would like you to think about the provision of WIC services only. Please answer the following questions related to your service delivery. You can answer each question by selecting the correct radio button/box or by indicating Other and providing explanation in the text box as appropriate.

1. How long has your local agency been providing WIC services in your community?
  - < 2 years
  - 2-5 years
  - 5-10 years
  - 10 years or more
2. Which of the following best describes the geographic service area for your local agency?
  - Primarily provides services in an urban/suburban area
  - Primarily provides services in a rural area
  - Services are provided in urban/suburban and rural areas
3. How many fixed sites do you have that provide WIC services that are owned, leased, or rented by your local agency?
4. How many "satellite sites" (such as a Church, Community Center, etc.) do you have where WIC services are provided?
5. How many mobile vans do you have that provide WIC services?
6. Are services provided at any of your sites in languages other than English?
  - Yes
  - No

7. If services are provided in languages other than English, which of the following methods are used by your local agency? (Check all that apply.)

- Bilingual staff
- Language line using telephone
- Language interpreters are available for staff use
- Clients are asked to bring their own interpreters
- Other (Describe)

8. Does the State agency require your agency to conduct any vendor monitoring activities?

- Yes
- No

9. Does your local agency receive separate funding for a breastfeeding peer counseling program?

- Yes, we receive funds for and conduct a breastfeeding peer counseling program
- Yes, but the breastfeeding peer counseling services are provided by an agency other than ours
- No, we do not have a breastfeeding peer counseling program

10. How is anthropometric information collected for determining client eligibility?

- Height, weight, or blood tests are completed at the clinic site
- Height, weight, or blood tests are provided by medical providers and clients bring the information to the clinic
- Both methods above are used

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

## Exhibit 6: Change in Costs Questions Screen

### Questions about Changes in Program Costs

Please confirm

Please respond to the following questions related to factors that may drive the cost of WIC services at your local agency. You can answer each question by selecting the correct radio button/box or by indicating *Other* and providing explanation in the text box as appropriate. When finished, click Confirm and then navigate to the next screen.

1. Choose the option that best describes changes in your agency's costs since FFY 2010.
  - Steadily increased
  - Steadily decreased
  - Stayed about the same
  - Fluctuated up and down, depending on circumstances
2. Since FFY 2010, which of the following have resulted in increases of your agency's staffing costs? (Check all that apply.)
  - Increase in FTEs or permanent staff
  - Increase in staff salaries
  - Increase in fringe benefits costs
  - Decrease in staff vacancy rates
  - Hiring temporary staff
  - Increase in staff training costs
  - Increase in staff travel costs
  - Increase in staff awards
  - None of the above
  - Other (Describe)
3. Since FFY 2010, which of the following have resulted in decreases of your agency's staffing costs? (Check all that apply.)
  - Decrease in FTEs or permanent staff
  - Decrease in staff salaries (e.g., from salary freezes, furloughs)
  - Decrease in fringe benefits costs
  - Increase in staff vacancy rates (e.g., from hiring freezes)
  - Hiring temporary staff
  - Decrease in staff training costs
  - Decrease in staff travel costs
  - Decrease in staff awards
  - None of the above
  - Other (Describe)



4. Since FFY 2010, which of the following have resulted in increases of your agency's costs? (Check all that apply.)

- Increase in costs of facility space (e.g., rent, utilities)
- Increase in costs of facility services (e.g., maintenance, security)
- Increase in costs of equipment and/or supplies
- Increase in telecommunication costs
- Increase in information technology support services
- Increase in costs of banking services
- None of the above
- Other (Describe)

5. Since FFY 2010, which of the following have resulted in decreases of your agency's costs? (Check all that apply.)

- Decrease in costs of facility space (e.g., rent, utilities)
- Decrease in costs of facility services (e.g., maintenance, security)
- Decrease in costs of equipment and/or supplies
- Decrease in telecommunication costs
- Increase in information technology support services
- Decrease in costs of banking services
- None of the above
- Other (Describe)

6. Since FFY 2010, which of the following factors have contributed to increases of your agency's costs? (Check all that apply.)

- Increase in local agency's WIC NSA grant funds
- Increase in program participation
- Increase in local agency size (e.g., due to consolidation of local agencies)
- Increase in number of clinic sites
- Increase in indirect cost rates and/or indirect costs
- Decrease in in-kind contributions
- Decrease in outside funding sources
- None of the above
- Other (Describe)

7. Since FFY 2010, which of the following factors have contributed to decreases of your agency's costs? (Check all that apply.)

- Decrease in local agency's WIC NSA grant funds
- Decrease in program participation
- Decrease in local agency size (e.g., due to lower participation)
- Decrease in number of clinic sites
- Decrease in indirect cost rates and/or indirect costs
- Increase in in-kind contributions
- Increase in outside funding sources
- None of the above
- Other (Describe)

8. How old is the MIS system your agency used during FFY 2013?

- 1-4 years old
- 5-9 years old
- 10-15 years old
- Over 15 years old

8a. What net impact has the new MIS system had on your agency's total NSA expenditures?

- Reduced overall cost of operating WIC
- Costs have stayed about the same
- Increased overall cost of operating WIC
- Do not know the impact on overall cost

9. Since FFY 2010, what net impact has EBT had on total NSA expenditures?

- Not applicable (we do not have WIC EBT in my agency)
- Reduced overall cost of operating WIC
- Costs have stayed about the same
- Increased overall cost of operating WIC
- Do not know the impact on overall cost

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

## Exhibit 7: Labor/Personnel Expenditure

### Labor/Personnel Expenditures

In the table below, please enter your best estimate for the number of FTEs and total gross annual salaries for each type of staff. Please answer the questions at the bottom of the screen.

Type of Staff	Total FTEs ?	Total Gross Salary (net of fringe benefits) ?
A. Program Manager/Supervisor	<input type="text"/>	\$ 0.00 <input type="text"/>
B. Registered Dietitian	<input type="text"/>	\$ 0.00 <input type="text"/>
C. Bachelor's Degreed (or higher) Nutritionist	<input type="text"/>	\$ 0.00 <input type="text"/>
D. Non-Degreed Paraprofessional Nutrition Educator	<input type="text"/>	\$ 0.00 <input type="text"/>
E. Lab Tech/Specialist	<input type="text"/>	\$ 0.00 <input type="text"/>
F. WIC Clerk	<input type="text"/>	\$ 0.00 <input type="text"/>
G. Bachelor's Degreed (or higher) Breastfeeding Specialist	<input type="text"/>	\$ 0.00 <input type="text"/>
H. Breastfeeding Peer Counselor	<input type="text"/>	\$ 0.00 <input type="text"/>
I. Receptionist	<input type="text"/>	\$ 0.00 <input type="text"/>
J. Public Health Nurse	<input type="text"/>	\$ 0.00 <input type="text"/>
K. Social Worker	<input type="text"/>	\$ 0.00 <input type="text"/>
L. Computer Support/Maintenance	<input type="text"/>	\$ 0.00 <input type="text"/>
M. Vendor Specialist/Liaison	<input type="text"/>	\$ 0.00 <input type="text"/>

N. Accounting/Financial Staff	<input type="text"/>	\$ 0.00
O. Other Health Professionals	<input type="text"/>	\$ 0.00
P. Research/Evaluation Specialist	<input type="text"/>	\$ 0.00
Q. Other: SPECIFY <input type="text"/>	<input type="text"/>	\$ 0.00
R. Other: SPECIFY <input type="text"/>	<input type="text"/>	\$ 0.00
S. Other: SPECIFY <input type="text"/>	<input type="text"/>	\$ 0.00
T. Other: SPECIFY <input type="text"/>	<input type="text"/>	\$ 0.00

1. What is your fringe benefit rate?  %

2. Does your WIC agency share staff with other programs (e.g. SNAP, SCHIP MCH, Immunization)?

Yes

No

3. How are WIC staff salaries and benefits charged to WIC and other programs that staff may work on?

100% time reporting (for staff assigned to one functional area only)

Continuous time reporting (i.e., reported on a daily basis across more than one cost area)

Periodic time reporting (once a week/month/quarter)

Random moment-in-time sampling

Costs are shared based on negotiations

Costs are shared based on historical contributions by both programs

Other (Describe):

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

## Exhibit 8: Contracted Services Screen

Please confirm

### Expenditures Associated with Contracted Services

In the table below, please enter the amount of NSA expenditures ONLY on contracted services. Do NOT include expenditures associated with breastfeeding peer counselor support, EBT grants, etc.

1. Did your agency incur any expenditures associated with contracted services?  Yes  No

Contracted Services Paid for by NSA Funds ?	Estimated Yearly Expenditure ?
A. Staff training	\$ 0.00
B. Equipment or computer maintenance	\$ 0.00
C. Consulting Nutrition Professionals	\$ 0.00
D. Program evaluation services	\$ 0.00
E. Clerical support or temporary help	\$ 0.00
F. Other professional consultation	\$ 0.00
G. Software development or computer programming	\$ 0.00
H. Referral or outreach services provided by another agency	\$ 0.00
I. Other: SPECIFY <input type="text"/>	\$ 0.00
J. Other: SPECIFY <input type="text"/>	\$ 0.00
K. Other: SPECIFY <input type="text"/>	\$ 0.00

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

**Exhibit 9: Materials, Services, and Travel Screen**

## Expenditures Associated with Materials, Services, and Travel

Please confirm

In the table below, please enter the amount of NSA expenditures ONLY on materials, services, and travel. Do NOT include expenditures associated with breastfeeding peer counselor support, EBT grants, etc.

Please also answer the questions at the bottom of the screen.

1. Did your agency incur any expenditures associated with materials, services, or travel?  Yes  No

Description	Estimated Yearly Expenditure ?
A. Supplies	\$ 0.00
B. Equipment	\$ 0.00
C. Travel and Conference Costs	\$ 0.00
D. Communications/Internet	\$ 0.00
E. Computer Equipment/MIS Training	\$ 0.00
F. Employee Training	\$ 0.00
G. Other: SPECIFY <input type="text"/>	\$ 0.00
H. Other: SPECIFY <input type="text"/>	\$ 0.00
I. Other: SPECIFY <input type="text"/>	\$ 0.00
J. Other: SPECIFY <input type="text"/>	\$ 0.00

2. Does your local WIC agency share costs such as office space or materials with other programs (e.g., SNAP, SCHIP, Immunization)?

Yes

No

3. What is the method used by your local agency to distribute shared costs across multiple programs? (check all that apply)

Fixed dollar amount based on negotiated agreement

Amount based upon percentage of time working in programs or space used

Formula allocation based on negotiated rate

Historical expenditures

Other (Describe):

We do not know how the shared costs are allocated

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.



## Exhibit 10: Indirect Costs

### Indirect Costs

Please confirm

Please respond to the following questions about indirect costs.

1. Total program indirect costs (Please indicate amount paid)  \$

2. Allocation methodology

- Calculated using a percentage of our total budget
- Calculated using a percentage of salaries and benefits only
- Set as a fixed dollar amount of the WIC budget
- Direct charged and negotiated every year
- Other (describe):

3. Types of costs included in the indirect costs

Many times, indirect costs are used to support both overall local agency expenditures related to departmental administration and activities of offices outside of WIC. However, sometimes WIC programs receive support for activities that are necessary for program activities, such as accounting services or HR support.

For your local agency which, if any, of the following services that might be provided to your WIC agency are paid for through indirect costs? (Check all that apply)

- 3-A. Resource services, such as staff recruitment, hiring, and employee benefit management, or payroll
- 3-B. Accounting services
- 3-C. Utilities
- 3-D. Cost of space
- 3-E. Equipment maintenance
- 3-F. Computer and MIS support
- 3-G. Office equipment and/or supplies
- 3-H. General space maintenance and repair
- 3-I. Communications, such as telephone, fax, or Internet service
- 3-J. Fair hearings for participants

3-K. Other benefits to WIC funded from indirect cost not covered in the categories above:

Specify:

Specify:

Specify:

Specify:

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

**Exhibit 11: Other Sources of Funds**

### Other Sources of Funds ?

Screen last confirmed 17 Dec 2012 1:18 PM ET by iowa

In the table below, please estimate the dollar value of other sources of funds received by your local agency in FFY2013.

Source of Funds	Estimated Annual Dollar Amount
A. WIC infrastructure funds	\$0.00
B. WIC special project grant	\$0.00
C. WIC breastfeeding peer counselor funds	\$0.00
D. Non-federal local-appropriated funds	\$0.00
E. Non-federal state-appropriated funds	\$0.00
F. Other: SPECIFY <input type="text"/>	\$0.00
G. Other: SPECIFY <input type="text"/>	\$0.00
H. Other: SPECIFY <input type="text"/>	\$0.00
I. Other: SPECIFY <input type="text"/>	\$0.00

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

### Exhibit 12: In-kind Contributions

## In-Kind Contributions ?

Please indicate whether your local agency received any in-kind contributions (labor and non-labor) in FFY 2013 and the estimated dollar value for each area of in-kind contribution. In-kind contributions for local WIC agencies are defined as support for WIC activities funded and provided by another entity not directly supported by WIC program funds (Federal or State) or from departmental indirect costs. In-kind contributions at the local level may be funded by county government funds, block grant or other related program funding, or are donated to the WIC program from the sponsoring or other community agency. Some examples of in-kind support may include:

- Space donated for WIC services by a local church or community center
- Staff supported by county funds that work in the WIC site
- A receptionist paid for from sources other than WIC that greets clients and conducts intake
- Childcare services provided at a WIC site by an organization such as the YMCA

1. Are you able to estimate the total dollar value of all in-kind contributions to the WIC  Yes  No

If yes, provide total dollar value \$

Area of in-kind contribution	In-kind received?	Can you estimate the dollar value? <span style="border: 1px solid black; padding: 0 2px;">?</span>
A. Staff providing research support or training	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
B. Staff providing support for other state-level activities	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
C. Staff to support computer systems and networks	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
D. Facilities or other space considerations	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
E. Utilities	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
F. Telecommunications	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>

G. Computer equipment or maintenance	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
H. Office or other equipment	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
I. Office or other types of supplies	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
J. Vehicles for WIC use	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>
K. Other: SPECIFY <input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	<input type="radio"/> Yes <input type="radio"/> No If yes, provide amount \$ <input type="text"/>

Comments:

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

## Exhibit 13: Cost Reduction Strategies

### Cost Reduction Strategies ?

Screen last confirmed 17 Dec 2012 1:18 PM ET by iowa

FNS is interested in knowing of any innovative practices or policies your agency may have implemented since FFY 2010 that have helped you to contain NSA costs while still maintaining or improving your overall service delivery. When considering whether a practice or policy meets the criteria of being innovative, please consider that the practice should: continue quality services at a lower or reduced cost, meet challenges of reduced or same-level grant amounts, or replace older, less efficient practices or policies. If you have made any changes in the past three years that you consider to be innovative or cost effective, please provide a brief description, along with the impact these changes have had on your WIC Program NSA costs, in the text boxes provided below. FNS is interested in knowing of any innovative practices or policies your agency may have implemented since FFY 2010 that have helped you to contain NSA costs while still maintaining or improving your overall service delivery.

Brief description of innovative practice:

Impact on WIC NSA costs:

Save

Confirm

Clicking the Confirm button will confirm that you have entered all information on the screen. All screens must be confirmed before submitting the survey. Clicking the Save button will save the data entered and allow you to complete the information at a later time.

## Exhibit 14: Confirmation Screen

### Confirmation of Data Confirmation of Data ?

Screen last confirmed 17 Dec 2012 5:16 PM ET by iowa

This section summarizes expenditure data that you entered in the Survey Questions and Agency Costing Tool screens.

The tables display whether the data entered in each screen have been confirmed by you.

You must confirm the data entered in all of the screens in order for your submission to be considered complete.

The Confirmation screen will display error messages until all entries in all other screens have been confirmed.

To confirm the data, go to the appropriate screen and click on the *Confirm* button.

Making any changes in a screen that has been previously confirmed will automatically undo the confirm action; the confirmation stamp will disappear, and the Please Confirm message will be displayed again.

The user must re-confirm the screen if any changes are made since the previous confirmation.

### Survey Questions

Category	Confirmation Status
<a href="#">Demographics</a>	<b>Please confirm</b>
<a href="#">Services Provided</a>	<b>Please confirm</b>
<a href="#">Changes in Costs</a>	<b>Please confirm</b>

### Agency Costing Tool

Category	Yearly Expenditures	Confirmation Status
<a href="#">Labor/Personnel Expenditures</a>	\$270,079.12	<b>Please confirm</b>
<a href="#">Expenditures Associated with Contracted Services</a>	\$543.00	<b>Please confirm</b>
<a href="#">Expenditures Associated with Materials, Services and Travel</a>	\$28,217.31	<b>Please confirm</b>
<a href="#">Indirect Costs</a>	\$679.00	<b>Please confirm</b>
<a href="#">Other Sources of Funds</a>	\$62.00	Confirmed 17 Dec 2012 1:18 PM ET by iowa
<b>Agency Costing Total</b>	<b>\$299,580.43</b>	
<a href="#">In-Kind Contributions</a>		Confirmed 17 Dec 2012 1:18 PM ET by iowa



## Totals

Costing Type	Total from Individual Costing Screens	FFY 2013 Final NSA Closeout Expenditures
Agency	\$299,580.43	\$302,924.22
Totals	\$299,580.43	<b>\$2,646,880.37</b>
Agency Yearly Expenditure		Confirmed 07 May 2013 6:09 PM ET by iowa

**You must correct the following issues before you can confirm data entry:**

You must confirm the following screen: s: Labor/Personnel Expenditures, Expenditures Associated with Contracted Services, Expenditures Associated with Materials, Services and Travel, Indirect Costs  
The total expenditures overall should be within 10% of the Agency Information Screen