

Schedule 13
Funding Request for the 2014-15 Budget Cycle

Department: Corrections

Request Title: Sex Offender Treatment Monitoring

Priority Number: RA
Kevin R. Wasco

Dept. Approval by: _____
 Date: 11/01/2013

OSPB Approval by: *Greg M. ...*
 Date: 10/29/13

- Decision Item FY 2014-15
- Base Reduction Item FY 2014-15
- Supplemental FY 2013-14
- Budget Amendment FY 2014-15

Line Item Information		FY 2013-14		FY 2014-15		FY 2015-16
		1	2	3	4	6
	Fund	Appropriation FY 2013-14	Supplemental Request FY 2013-14	Base Request FY 2014-15	Funding Change Request FY 2014-15	Continuation Amount FY 2015-16
Total of All Line Items	Total	74,500,104	-	79,318,735	1,201,702	1,209,082
	FTE	51.8	-	42.8	13.0	13.0
	GF	72,141,382	-	76,745,581	1,201,702	1,209,082
	GFE	-	-	-	-	-
	CF	2,358,722	-	2,573,154	-	-
	RF	-	-	-	-	-
	FF	-	-	-	-	-
(1) Management	Total	44,623,647	-	46,290,809	63,136	63,136
(A) Executive Director's	FTE	-	-	-	-	-
Office Subprogram	GF	43,108,254	-	44,686,811	63,136	63,136
Health, Life, and Dental	GFE	-	-	-	-	-
	CF	1,515,393	-	1,603,998	-	-
	RF	-	-	-	-	-
	FF	-	-	-	-	-
(1) Management	Total	606,866	-	703,101	1,427	1,427
(A) Executive Director's	FTE	-	-	-	-	-
Office Subprogram	GF	587,122	-	679,591	1,427	1,427
Short-term Disability	GFE	-	-	-	-	-
	CF	19,744	-	23,510	-	-
	RF	-	-	-	-	-
	FF	-	-	-	-	-
(1) Management	Total	11,374,795	-	13,083,309	32,798	36,077
(A) Executive Director's	FTE	-	-	-	-	-
Office Subprogram	GF	11,000,858	-	12,653,932	32,798	36,077
S.B. 04-257 Amortization	GFE	-	-	-	-	-
Equalization Disbursement	CF	373,937	-	429,377	-	-
	RF	-	-	-	-	-
	FF	-	-	-	-	-

Department of Corrections
Sex Offender Treatment Monitoring

Schedule 13
Funding Request for the 2014-15 Budget Cycle

Line Item Information		FY 2013-14		FY 2014-15		FY 2015-16
		1	2	3	4	6
	Fund	Appropriation FY 2013-14	Supplemental Request FY 2013-14	Base Request FY 2014-15	Funding Change Request FY 2014-15	Continuation Amount FY 2015-16
(1) Management	Total	10,228,268	-	12,265,602	30,747	34,848
(A) Executive Director's Office Subprogram	FTE	-	-	-	-	-
S.B. 06-235 Supplemental	GF	9,890,686	-	11,863,061	30,747	34,848
Amortization Equalization	GFE	-	-	-	-	-
Disbursement	CF	337,582	-	402,541	-	-
	RF	-	-	-	-	-
	FF	-	-	-	-	-
(1) Management	Total	349,740	-	349,421	325	325
(C) Inspector General Subprogram	FTE	-	-	-	-	-
Operating Expenses	GF	266,553	-	266,234	325	325
	GFE	-	-	-	-	-
	CF	83,187	-	83,187	-	-
	RF	-	-	-	-	-
	FF	-	-	-	-	-
(3) Support Services	Total	1,556,475	-	1,550,745	5,850	5,850
(D) Communications Subprogram	FTE	-	-	-	-	-
Operating Expenses	GF	1,556,475	-	1,550,745	5,850	5,850
	GFE	-	-	-	-	-
	CF	-	-	-	-	-
	RF	-	-	-	-	-
	FF	-	-	-	-	-
(3) Support Services	Total	279,259	-	276,510	325	325
(F) Training Subprogram	FTE	-	-	-	-	-
Operating Expenses	GF	279,259	-	276,510	325	325
	GFE	-	-	-	-	-
	CF	-	-	-	-	-
	RF	-	-	-	-	-
	FF	-	-	-	-	-
(3) Support Services	Total	1,618,749	-	1,616,202	2,600	2,600
(G) Information Systems Subprogram	FTE	-	-	-	-	-
Operating Expenses	GF	1,618,749	-	1,616,202	2,600	2,600
	GFE	-	-	-	-	-
	CF	-	-	-	-	-
	RF	-	-	-	-	-
	FF	-	-	-	-	-

Department of Corrections
Sex Offender Treatment Monitoring

Schedule 13
Funding Request for the 2014-15 Budget Cycle

Line Item Information		FY 2013-14		FY 2014-15		FY 2015-16
		1	2	3	4	6
		Appropriation FY 2013-14	Supplemental Request FY 2013-14	Base Request FY 2014-15	Funding Change Request FY 2014-15	Continuation Amount FY 2015-16
Fund						
(4) Inmate Programs (E) Sex Offender Treatment Subprogram Personal Services	Total	3,528,612	-	2,997,691	915,063	915,063
	FTE	51.8		42.8	13.0	13.0
	GF	3,500,233		2,967,650	915,063	915,063
	GFE					
	CF	28,379		30,041		
	RF	-	-	-	-	-
	FF	-	-	-	-	-
(4) Inmate Programs (E) Sex Offender Treatment Subprogram Operating Expenses	Total	91,193	-	85,776	6,500	6,500
	FTE	-	-	-	-	-
	GF	90,693		85,276	6,500	6,500
	GFE					
	CF	500		500		
	RF	-	-	-	-	-
	FF	-	-	-	-	-
(4) Inmate Programs (E) Sex Offender Treatment Subprogram Polygraph Testing	Total	242,500	-	99,569	142,931	142,931
	FTE	-	-	-	-	-
	GF	242,500		99,569	142,931	142,931
	GFE					
	CF	-	-	-	-	-
	RF	-	-	-	-	-
	FF	-	-	-	-	-
Letternote Text Revision Required? Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/> If yes, describe the Letternote Text Revision: Cash or Federal Fund Name and COFRS Fund Number: None Reappropriated Funds Source, by Department and Line Item Name: None Approval by OIT? Yes: <input type="checkbox"/> No: <input type="checkbox"/> Not Required: <input checked="" type="checkbox"/> Schedule 13s from Affected Departments: None Other Information: None						

This Page Intentionally Left Blank