

**Grant Expenditure and Narrative Reports (Revised 4/2021)****Early Literacy Support Block Grant**

Educator Excellence and Equity Division  
 California Department of Education

**Instructions:**

Each grant recipient is required to complete and submit the Year-to-Date (YTD) Expenditure and Progress Report Form and Budget Narrative Report Forms showing expenditures during the Planning Year (December 1, 2020, through June 30, 2021).

Please complete the Instructions & LEA Info Form, YTD Form and the Narrative Form for the appropriate Quarter (Q3 or Q4). In April 2021, the grant period was extended a year, making FY 2020/21 a Planning Year. The Planning Year (December 1, 2020, through June 30, 2021) Quarter 3 and Quarter 4 reports only accounts for the grant funds (\$40,000 per LEA plus \$10,000 per participating eligible school) used for the purposes of conducting a root cause analysis, carrying out a needs assessment, and developing a three-year Literacy Action Plan. The ELSB Grant funds can be rolled over for the life of the grant (December 2020 - June 2024) as long as there is an approved Budget Revision Request.

**Digital Signature:** When the Expenditure Forms are completed and ready for signatures, save/export the YTD Form as a PDF to digitally sign the form for submission along with the Excel Version of the Budget Documents: YTD Form and Narrative Form(s). Please include the LEA name and corresponding quarter in your file name. (e.g., Sample Elementary PlanningYearQ3 ELSB Expenditure Report)

Email report to [ELSBgrant@cde.ca.gov](mailto:ELSBgrant@cde.ca.gov)

Requested Information (will autopopulate onto the YTD Form)	Your Response
Local Educational Agency (LEA) Name:	Alum Rock Union Elementary School District
Project Coordinator:	Rebecca Jensen
Project Coordinator Telephone Number:	(408) 928-7650
Project Coordinator Fax Number:	(408) 928-7651
Project Coordinator Email Address:	<a href="mailto:rebecca.jensen@arusd.org">rebecca.jensen@arusd.org</a>
Fiscal Agent Contact (If different from the Project Coordinator):	Teresa Langner
Fiscal Agent Telephone Number:	(408) 928-6856
Fiscal Agent Email Address:	<a href="mailto:teresa.langner@arusd.org">teresa.langner@arusd.org</a>
Grant Award Number (listed on your Grant Award Notification):	20-25515-69369-00
Grant Award Amount (listed on your Grant Award Notification):	\$613,140.00

Enter Planning Year Budget Amounts (\$40,000 per LEA plus \$10,000 per participating eligible school) -- Enter funds used for the purposes of conducting a root cause analysis, carrying out a needs assessment for each eligible school and preparing the LEA three-year Literacy Action Plan (Amounts will autopopulate onto the YTD Form).	
Object Code	Planning Year Budget
1000-1999 Certificated Salaries/Stipends	14,847.00
2000-2999 Classified Salaries	0.00
3000-3999 Employee Benefits	3,079.00
4000-4999 Books and Supplies	11,213.00
5000-5999 Services and Other Operating Expenditures	17,000.00
5200 Participant Travel/Project Staff Travel	0.00
5800 Professional/Consulting Services & Op. Exp.	0.00
<b>SUBTOTAL</b>	<b>46,139.00</b>
7300-7399 Indirect Costs	3,861.00
5100 Subagreement for Services	0.00
6000-6599 Capital Outlay	0.00
<b>TOTAL</b>	<b>50,000.00</b>

**Early Literacy Support Block (ELSB) Grant 12-1-2020 to 6-30-2024 Year-to-Date Expenditures and Progress Report**  
**ELSB Grant Program - Planning Year (12/01/2020 - 06/30/2021) Expenditures**

California Department of Education  
 Educator Excellence and Equity Division  
 ELSB Grant Program  
 1430 N Street, Suite 4309, Sacramento, CA 95814

**Please Note:** The LEA information and the Budget and Expenditure Amounts will autopopulate from the LEA Info and Narrative Form. Please select the correct check box for #4, #17, and #18.

**4. Reporting Time Frame (Select One)**

1st Report  
 2nd Report  
 3rd Report  
 4th Report

Due 04/30/21  
 Due 07/30/21

**1. Grant Award No.:** 20-25515-69369-00 **Total Grant Award:** \$613,140.00

**2. Local Educational Agency:** Alum Rock Union Elementary School District

**3. Project Director:** Rebecca Jensen **Phone:** (408) 928-7650

**FAX Number:** (408) 928-7651 **E-mail:** rebecca.jensen@arUSD.org

<b>Standardized Account Code Structure</b>	<b>Resource Code:</b> 7810
	<b>Revenue Object Code:</b> 8590

Object Code	Planning Year Budget	1st PERIOD		2nd PERIOD		3rd PERIOD		4th PERIOD		CUMULATIVE TOTAL Total of All Periods
		Expenditure	Balance	Expenditure	Balance	Expenditure	Balance	Expenditure	Balance	
5. 1000-1999 Certified Salaries/Suppends	14,847.00			1,965.48	12,881.52	0.00	12,881.52	1,116.78	11,764.74	3,082.26
6. 2000-2999 Classified Salaries	0.00			0.00	0.00	0.00	0.00	0.00	0.00	0.00
7. 3000-3999 Employee Benefits	3,079.00			348.75	2,730.25	0.00	2,730.25	191.62	2,538.63	540.37
8. 4000-4999 Books and Supplies	11,213.00			0.00	11,213.00	0.00	11,213.00	8,570.47	2,642.53	8,570.47
9. 5000-5999 Services and Other Operating Expenditures	17,000.00			0.00	17,000.00	0.00	17,000.00	0.00	17,000.00	0.00
10. 5200 Participant Travel/Project Staff Travel	0.00			0.00	0.00	0.00	0.00	0.00	0.00	0.00
11. 5800 Professional/Consulting Services & Op. Exp.	0.00			0.00	0.00	0.00	0.00	0.00	0.00	0.00
12. <b>SUBTOTAL</b>	<b>46,139.00</b>			<b>2,314.23</b>	<b>43,824.77</b>	<b>0.00</b>	<b>43,824.77</b>	<b>9,878.87</b>	<b>33,945.90</b>	<b>12,193.10</b>
13. 7300-7399 Indirect Costs 8.37%	3,861.00			193.70	3,667.30	0.00	3,667.30	826.86	2,840.44	1,020.56
14. 5100 Subagreement for Services	0.00			0.00	0.00	0.00	0.00	0.00	0.00	0.00
15. 6000-6599 Capital Outlay	0.00			0.00	0.00	0.00	0.00	0.00	0.00	0.00
16. <b>TOTAL</b>	<b>50,000.00</b>			<b>2,507.93</b>	<b>47,492.07</b>	<b>0.00</b>	<b>47,492.07</b>	<b>10,705.73</b>	<b>36,786.34</b>	<b>13,213.66</b>

**17. Budget Revision Requested (10% rule)**  Yes  No

Check the box that applies.  
 A Budget Revision is required for changes over 10 percent on any line item (either an under expenditure or over expenditure).  
 If yes is checked, a Budget Revision Request and Justification forms must be attached for review and approval.

**18.  Activities are being conducted as planned.**

Activities are not being conducted as planned.  
 Check the box that applies.

**19.** Rebecca Jensen, Principal *RJ* July 26, 2021 Date  
 Project Director (Printed Name and Signature) *Rebecca Jensen* July 26, 2021 Date  
 Superintendent Designee (Printed Name and Signature) \_\_\_\_\_ Date

**20.** \_\_\_\_\_ Date  
 CDE Fiscal Monitor's Approval  
 \_\_\_\_\_ Date  
 CDE Project Monitor's Approval  
 \_\_\_\_\_ Date

This is to certify that the Year-to-Date Expenditures and Progress Report has been prepared in accordance with the applicable Federal and State regulations. To the best of my knowledge, the data contained in this report are true and accurate. Any program results are supported by documented deliverables (i.e., professional development/products) on file at the Local Educational Agency.

Other Signature, if required (Printed Name and Signature)

Date

CDE Administrator's Approval

Date

**Budget Narrative Form Planning Year Quarter 3**

Early Literacy Support Block Grant  
 Educator Excellence and Equity Division  
 California Department of Education

**Instructions:**

Fill out this form to explain how the grant funds are used for the Local Educational Agency (LEA) and each School Site. Provide a justification for how amount table by line item was determined. (e.g. Project Director Salary \$1,000 x 12 months = \$12,000. Literacy Curriculum \$100 x 50 students = \$5,000).  
 The Object Codes and Line Detail information MUST match the Planning Year Narrative Budget in your Literacy Action Plan.  
 Add rows as necessary. Group the object codes chronologically.  
 Enter dollar amounts into the cells with a placeholder of zero (\$0.00).  
 Refer to the *California School Accounting Manual (CSAM)* <https://www.cde.ca.gov/ftacsa/> for information on Object Codes.  
 Only the first \$25,000 of each subcontract can be used towards the indirect calculation per Procedure 330 in the CSAM.

Enter indirect Percentage Rate in the space provided for Object Code 7000 with a placeholder of 0.00%. The indirect amount will be calculated for you. (e.g. 10% indirect rate (10% x \$100,000 = \$10,000). The indirect amount will automatically calculate. If you choose to use less indirect, you may type the actual amount of indirect cost into the cell.  
**Do Not Delete** any gray or blue shaded rows or columns. These cells have formulas set for calculating the Totals for each Object Code category.  
**Please Note:** The Totals will auto-populate into the YTD Form.

Object Code	Line Detail/Calculation	School Site #1	School Site #2	School Site #3	School Site #4	School Site #5	School Site #6	School Site #7	School Site #8	School Site #9	School Site #10	School Site #11	Total of Expenditure
1000 Certificated Salaries	Training and site collaboration for writing the action plan. (44 hours x \$44.67/hour = \$1,965.48)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,965.48
1000 Certificated Salaries		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
1000 Certificated Salaries		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
1000 Certificated Salaries		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2000 Classified Salaries	<b>Total Object Code 1000</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,965.48
2000 Classified Salaries		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2000 Classified Salaries		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2000 Classified Salaries		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2000 Classified Salaries		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3000 Employee Benefits	<b>Total Object Code 2000</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3000 Employee Benefits	Statutory benefits for extended duty hours listed above.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3000 Employee Benefits		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3000 Employee Benefits		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3000 Employee Benefits		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4000 Books and Supplies	<b>Total Object Code 3000</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4000 Books and Supplies		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4000 Books and Supplies		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4000 Books and Supplies		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4000 Books and Supplies		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5000 Services and Other	<b>Total Object Code 4000</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5000 Services and Other	Operating Expenditures (excluding Sub agreements for Services and Travel)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5000 Services and Other	Operating Expenditures (excluding Sub agreements for Services and Travel)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5000 Services and Other	Operating Expenditures (excluding Sub agreements for Services and Travel)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5000 Services and Other	Operating Expenditures (excluding Sub agreements for Services and Travel)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5000 Services and Other	Operating Expenditures (excluding Sub agreements for Services and Travel)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5200 Participant/Travel/Project Staff Travel	<b>Total Object Code 5000</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5200 Participant/Travel/Project Staff Travel		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5200 Participant/Travel/Project Staff Travel		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5200 Participant/Travel/Project Staff Travel		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5200 Participant/Travel/Project Staff Travel		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5800 Professional/Consulting/Services & Op. Exp.	<b>Total Object Code 5200</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5800 Professional/Consulting/Services & Op. Exp.		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5800 Professional/Consulting/Services & Op. Exp.		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5800 Professional/Consulting/Services & Op. Exp.		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5800 Professional/Consulting/Services & Op. Exp.		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Subtotal</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7000 Indirect Costs (based on LEA's established rate)	8.37%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,314.23
5100 Sub Agreement for Services	<b>Total Object Code 7000</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$193.70
5100 Sub Agreement for Services		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$193.70
5100 Sub Agreement for Services		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5100 Sub Agreement for Services		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5100 Sub Agreement for Services		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6000 Capital Outlay	<b>Total Object Code 5100</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6000 Capital Outlay		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6000 Capital Outlay		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6000 Capital Outlay		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6000 Capital Outlay		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,507.93

Please indicate the Planning Year Quarter 3 Expenditures for grant funds (\$40,000 per participating eligible school) used for the purposes of conducting a root cause analysis, carrying out a needs assessment, and developing a three-year Literacy Action Plan. Please report the Local Educational Agency and each School Site Separately.

