

Schedule 13

Funding Request for the FY 2015-16 Budget Cycle

Department of Health Care Policy and Financing

PB Request Number NPS-02

Request Titles

SNP-02 Supplemental Request for CCLS

Dept. Approval By:	Josh Block 	<u> </u>	X	Supplemental FY 2014-15
		<u> </u>		Change Request FY 2015-16
		<u> </u>		Base Reduction FY 2015-16
OSPB Approval By:		<u> </u>		Budget Amendment FY 2015-16

Line Item Information	Fund	FY 2014-15	FY 2015-16		FY 2016-17	
		Appropriation	Supplemental Request	Base Request	Governor's Revised Request	Budget Amendment
	Total	\$386,909	\$40,975	\$599,833	\$0	\$0
	FTE	-	-	-	-	-
Total of All Line Items	GF	\$193,455	\$20,487	\$299,917	\$0	\$0
	CF	\$0	\$0	\$0	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0
	FF	\$193,454	\$20,488	\$299,916	\$0	\$0

Line Item Information	Fund	FY 2014-15	FY 2015-16		FY 2016-17	
		Appropriation	Supplemental Request	Base Request	Governor's Revised Request	Budget Amendment
	Total	\$386,909	\$40,975	\$599,833	\$0	\$0
01. Executive	FF	\$193,454	\$20,488	\$299,916	\$0	\$0
Director's Office - Capitol Complex Leased Space	GF	\$193,455	\$20,487	\$299,917	\$0	\$0

Letternote Text Revision Required?	Yes <u> </u>	No <u> </u>	X <u> </u>	If Yes, describe the Letternote Text Revision:
Cash or Federal Fund Name and CORE Fund Number: FF: Title XIX				
Reappropriated Funds Source, by Department and Line Item Name: N/A				
Approval by OIT?	Yes <u> </u>	No <u> </u>	Not Required: <u> </u>	X <u> </u>
Schedule 13s from Affected Departments: Department of Personnel & Administration				
Other Information: N/A				