CALIFORNIA DEPARTMENT OF EDUCATION
AUDITED FISCAL REPORT FOR
MIGRANT SPECIAL SERVICES CONTRACTS
A U D 9500-A Page 1 of 4 (06/19)

Fiscal Year Ending June 30, 2019

Contract Number CMSS

Vendor Code

Full Name of Contractor

Section 1 - Revenue	Column A Cumulative CDNFS 9500-A	Column B Audit Adjustments	Column C Cumulative Per Audit
Restricted Income Other:			
Restricted Income Other:			
Subtotal			
Interest Earned on Child Development Apportionment Payments			
Unrestricted Income Other:			
Total Revenue			

Fiscal Year Ending June 30, 2019

Contract Number CMSS

Vendor Code

Full Name of Contractor

Section 2 - Reimbursable Expenses	Column A Cumulative CDNFS 9500-A	Column B Audit Adjustments	Column C Cumulative Per Audit
1000 Certificated Salaries			
2000 Classified Salaries			
3000 Employee Benefits			
4000 Books and Supplies			
5000 Services and Other Operating Expenses			
Indirect Costs (Include in Administrative Cost)			
Non-Reimbursable (State Use Only)			
Total Reimbursable Expenses			
Total Administrative Cost (included in section 2 above)			
Days of Operation			

Approved Indirect Cost Rate:

COMMENTS - If necessary, attach additional sheets to explain adjustments:

☐ NO SUPPLEMENTAL REVENUE Check this box and omit Page 3.

Fiscal Year Ending June 30, 2019

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Section 3 - Supplemental Revenue	Column A Cumulative CDNFS 9500-A	Column B Audit Adjustments	Column C Cumulative Per Audit
Enhancement Funding			
Other:			
Other:			
Total Supplemental Revenue			

Section 4 - Supplemental Expenses	Column A Cumulative CDNFS 9500-A	Column B Audit Adjustments	Column C Cumulative Per Audit
1000 Certificated Salaries			
2000 Classified Salaries			
3000 Employee Benefits			
4000 Books and Supplies			
5000 Services and Other Operating Expenses			
6000 Equipment / Capital Outlay			
Depreciation or Use Allowance			
Indirect Costs			
Non-reimbursable Expenses 6100-6500 Non-reimbursable Capital Outlay			
Total Supplemental Expenses			

Fiscal Year Ending June 30, 2019

Contract Number CMSS

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Section 5 - Summary	Column A Cumulative CDNFS 9500-A	Column B Audit Adjustments	Column C Cumulative Per Audit
Restricted Program Income			
Interest Earned on Apportionment Payments			
Total Reimbursable Expenses			
Total Administrative Cost			
Days of Operation			