

MDAH/Statewide Oral History P. O. Box 571

h t holmes, Director

AGENCY		ADDRESS		CHIEF EXECUTIVE OFFICER	
	Actual Expenses FY Ending June 30, 2013	Estimate Expenses FY Ending June 30, 2014	Requested for FY Ending June 30, 2015	Requested Increase (+) or Decrease (-) FY 2015 vs. FY 2014 (Col. 3 vs. Col. 2)	
				AMOUNT	PERCENT
I. A. PERSONAL SERVICES					
1. Salaries, Wages & Fringe Benefits (Base)					
a. Additional Compensation					
b. Proposed Vacancy Rate (Dollar Amount)					
c. Per Diem					
Total Salaries, Wages & Fringe Benefits					
2. Travel					
a. Travel & Subsistence (In-State)					
b. Travel & Subsistence (Out-of-State)					
c. Travel & Subsistence (Out-of-Country)					
Total Travel					
B. CONTRACTUAL SERVICES (Schedule B):					
a. Tuition, Rewards & Awards					
b. Communications, Transportation & Utilities					
c. Public Information					
d. Rents					
e. Repairs & Service					
f. Fees, Professional & Other Services					
g. Other Contractual Services					
h. Data Processing					
i. Other					
Total Contractual Services					
C. COMMODITIES (Schedule C):					
a. Maintenance & Construction Materials & Supplies					
b. Printing & Office Supplies & Materials					
c. Equipment, Repair Parts, Supplies & Accessories					
d. Professional & Scientific Supplies & Materials					
e. Other Supplies & Materials					
Total Commodities					
D. CAPITAL OUTLAY:					
1. Total Other Than Equipment (Schedule D-1)					
2. Equipment (Schedule D-2):					
b. Road Machinery, Farm & Other Working Equipment					
c. Office Machines, Furniture, Fixtures & Equipment					
d. IS Equipment (Data Processing & Telecommunications)					
e. Equipment - Lease Purchase					
f. Other Equipment					
Total Equipment (Schedule D-2)					
3. Vehicles (Schedule D-3)					
4. Wireless Comm. Devices (Schedule D-4)					
E. SUBSIDIES, LOANS & GRANTS (Schedule E):	50,000	50,000	50,000		
TOTAL EXPENDITURES	50,000	50,000	50,000		
II. BUDGET TO BE FUNDED AS FOLLOWS:					
Cash Balance-Unencumbered					
General Fund Appropriation (Enter General Fund Lapse Below)	50,000	50,000	50,000		
State Support Special Funds					
Federal Funds _____ Other Special Funds (Specify) _____					
Less: Estimated Cash Available Next Fiscal Period					
TOTAL FUNDS (equals Total Expenditures above)	50,000	50,000	50,000		
GENERAL FUND LAPSE					
III. PERSONNEL DATA					
Number of Positions Authorized in Appropriation Bill	a.) Full Perm				
	b.) Full T-L				
	c.) Part Perm.				
	d.) Part T-L				
Average Annual Vacancy Rate (Percentage)	a.) Full Perm				
	b.) Full T-L				
	c.) Part Perm.				
	d.) Part T-L				

Approved by: Board of Trustees, MDAH
 Official of Board or Commission

Budget Officer: Robert N. T. Benson / rbenson@mdah.state.ms.us

Phone Number: 601-576-6850

Submitted by: h t holmes
 Name

Title: Director

Date: July 31, 2013

REPORT BY FUNDING SOURCE

Name of Agency MDAH/Statewide Oral History

Specify Funding Sources As Shown Below	FY 2013 Actual Amount	% Of Line Item	% Of Total Budget	FY 2014 Estimated Amount	% Of Line Item	% Of Total Budget	FY 2015 Requested Amount	% Of Line Item	% Of Total Budget
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Salaries									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Travel									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Contractual									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Commodities									

REPORT BY FUNDING SOURCE

Name of Agency MDAH/Statewide Oral History

Specify Funding Sources As Shown Below	FY 2013 Actual Amount	% Of Line Item	% Of Total Budget	FY 2014 Estimated Amount	% Of Line Item	% Of Total Budget	FY 2015 Requested Amount	% Of Line Item	% Of Total Budget
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Other Than Equipment									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Equipment									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Vehicles									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Wireless Comm. Devices									

REQUEST BY FUNDING SOURCE

Name of Agency MDAH/Statewide Oral History

Specify Funding Sources As Shown Below	FY 2013 Actual Amount	% Of Line Item	% Of Total Budget	FY 2014 Estimated Amount	% Of Line Item	% Of Total Budget	FY 2015 Requested Amount	% Of Line Item	% Of Total Budget
1. General State Support Special (Specify)	50,000	100.00%		50,000	100.00%		50,000	100.00%	
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal Other Special (Specify)									
10.									
11.									
12.									
13.									
Total Subsidies, Loans & Grants	50,000		100.00%	50,000		100.00%	50,000		100.00%
1. General State Support Special (Specify)	50,000	100.00%		50,000	100.00%		50,000	100.00%	
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal Other Special (Specify)									
10.									
11.									
12.									
13.									
TOTAL	50,000		100.00%	50,000		100.00%	50,000		100.00%

SPECIAL FUNDS DETAIL

MDAH/Statewide Oral History
Name of Agency

S. STATE SUPPORT SPECIAL FUNDS		(1) Actual Revenues FY 2013	(2) Estimated Revenues FY 2014	(3) Requested Revenues FY 2015
Source (Fund Number)	Detailed Description of Source			
	Cash Balance-Unencumbered			
Budget Contingency Fund	BCF - Budget Contingency Fund			
Education Enhancement Fund	EEF - Education Enhancement Fund			
Health Care Expendable Fund	HCEF - Health Care Expendable Fund			
Tobacco Control Fund	TCF - Tobacco Control Fund			
Hurricane Disaster Reserve Fund	HDRF - Hurricane Disaster Reserve Fund			
Capital Expense Fund	CEF - Capital Expense Fund			
Section S TOTAL				

A. FEDERAL FUNDS*		Percentage Match Requirement		(1) Actual Revenues FY 2013	(2) Estimated Revenues FY 2014	(3) Requested Revenues FY 2015
Source (Fund Number)	Detailed Description of Source	FY 2014	FY 2015			
	Cash Balance-Unencumbered					
Section A TOTAL						

B. OTHER SPECIAL FUNDS (NON-FED'L)		(1) Actual Revenues FY 2013	(2) Estimated Revenues FY 2014	(3) Requested Revenues FY 2015
Source (Fund Number)	Detailed Description of Source			
	Cash Balance-Unencumbered			
Section B TOTAL				

Section S + A + B TOTAL				
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C. TREASURY FUND/BANK ACCOUNTS*			(1) Reconciled Balance as of 6/30/13	(2) Balance as of 6/30/14	(3) Balance as of 6/30/15
Name of Fund/Account	Fund/Account Number	Name of Bank (If Applicable)			

* Any non-federal funds that have restricted uses must be identified and narrative of restrictions attached.

**NARRATIVE OF SPECIAL FUNDS DETAIL
AND TREASURY FUND/BANK ACCOUNTS**

MDAH/Statewide Oral History

Name of Agency

CONTINUATION AND EXPANDED REQUEST

MDAH/Statewide Oral History _____

Program No. _____ of _____ I. Programs

AGENCY

SUMMARY OF ALL PROGRAMS

PROGRAM

	FY 2013 Actual				
	(1) General	(2) State Support Special	(3) Federal	(4) Other Special	(5) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants	50,000				50,000
Total	50,000				50,000
No. of Positions (FTE)					

	FY 2014 Estimate				
	(6) General	(7) State Support Special	(8) Federal	(9) Other Special	(10) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants	50,000				50,000
Total	50,000				50,000
No. of Positions (FTE)					

	FY 2015 Increase/Decrease for Continuation				
	(11) General	(12) State Support Special	(13) Federal	(14) Other Special	(15) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants					
Total					
No. of Positions (FTE)					

Note: FY2015 Total Request = FY2014 Estimated + FY2015 Incr(Decr) for Continuation + FY2015 Expansion/Reduction of Existing Activities + FY2015 New Activities.

CONTINUATION AND EXPANDED REQUEST

MDAH/Statewide Oral History
AGENCY _____

Program No. _____ of 1 Programs

SUMMARY OF ALL PROGRAMS

PROGRAM

FY 2015 Expansion/Reduction of Existing Activities				
(16) General	(17) State Support Special	(18) Federal	(19) Other Special	(20) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants				
Total				
No. of Positions (FTE)				

FY 2015 New Activities				
(21) General	(22) State Support Special	(23) Federal	(24) Other Special	(25) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants				
Total				
No. of Positions (FTE)				

FY 2015 Total Request				
(26) General	(27) State Support Special	(28) Federal	(29) Other Special	(30) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants	50,000			50,000
Total	50,000			50,000
No. of Positions (FTE)				

Note: FY2015 Total Request = FY2014 Estimated + FY2015 Incr(Decr) for Continuation + FY2015 Expansion/Reduction of Existing Activities + FY2015 New Activities.

SUMMARY OF PROGRAMS
FORM MBR-1-03sum

MDAH/Statewide Oral History
Agency Name

FUNDING REQUESTED FISCAL YEAR 2015

PROGRAM		GENERAL	ST.SUPP.SPECIAL	FEDERAL	OTHER SPECIAL	TOTAL
1.	STATEWIDE ORAL HISTORY	50,000				50,000
	SUMMARY OF ALL PROGRAMS	50,000				50,000

CONTINUATION AND EXPANDED REQUEST

MDAH/Statewide Oral History _____

Program No. 1 of 1 Programs

AGENCY

STATEWIDE ORAL HISTORY

PROGRAM

	FY 2013 Actual				
	(1) General	(2) State Support Special	(3) Federal	(4) Other Special	(5) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants	50,000				50,000
Total	50,000				50,000
No. of Positions (FTE)					

	FY 2014 Estimate				
	(6) General	(7) State Support Special	(8) Federal	(9) Other Special	(10) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants	50,000				50,000
Total	50,000				50,000
No. of Positions (FTE)					

	FY 2015 Increase/Decrease for Continuation				
	(11) General	(12) State Support Special	(13) Federal	(14) Other Special	(15) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants					
Total					
No. of Positions (FTE)					

Note: FY2015 Total Request = FY2014 Estimated + FY2015 Incr(Decr) for Continuation + FY2015 Expansion/Reduction of Existing Activities + FY2015 New Activities.

CONTINUATION AND EXPANDED REQUEST

MDAH/Statewide Oral History
AGENCY

Program No. 1 of 1 Programs

STATEWIDE ORAL HISTORY

PROGRAM

FY 2015 Expansion/Reduction of Existing Activities				
(16) General	(17) State Support Special	(18) Federal	(19) Other Special	(20) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants				
Total				
No. of Positions (FTE)				

FY 2015 New Activities				
(21) General	(22) State Support Special	(23) Federal	(24) Other Special	(25) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants				
Total				
No. of Positions (FTE)				

FY 2015 Total Request				
(26) General	(27) State Support Special	(28) Federal	(29) Other Special	(30) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants	50,000			50,000
Total	50,000			50,000
No. of Positions (FTE)				

Note: FY2015 Total Request = FY2014 Estimated + FY2015 Incr(Decr) for Continuation + FY2015 Expansion/Reduction of Existing Activities + FY2015 New Activities.

PROGRAM DECISION UNITS

MDAH/Statewide Oral History

1 - STATEWIDE ORAL HISTORY

AGENCY

PROGRAM NAME

	A	B	C	D	E	F	G	H
EXPENDITURES:	FY 2014 Appropriation	Escalations By DFA	Non-Recurring Items	Total Funding Change	FY 2015 Total Request			
SALARIES								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
TRAVEL								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
CONTRACTUAL								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
COMMODITIES								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
CAPITAL-OTE								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
EQUIPMENT								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
VEHICLES								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
WIRELESS DEV								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
SUBSIDIES	50,000				50,000			
GENERAL	50,000				50,000			
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
TOTAL	50,000				50,000			

FUNDING:

GENERAL FUNDS	50,000				50,000			
ST.SUP.SPCL.FUNDS								
FEDERAL FUNDS								
OTHER SP.FUNDS								
TOTAL	50,000				50,000			

POSITIONS:

GENERAL FTE								
ST.SUP.SPCL.FTE								
FEDERAL FTE								
OTHER SP FTE								
TOTAL FTE								

PRIORITY LEVEL:

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PROGRAM NARRATIVE

Program Data Collected in Accordance with the
Mississippi Performance Budget and Strategic Planning Act of 1994
(To Accompany Form MBR-1-03)

MDAH/Statewide Oral History

1 - STATEWIDE ORAL HISTORY

AGENCY NAME

PROGRAM NAME

I. Program Description:

Funds provided will continue and expand the program of oral history interviews with citizens of the state. Under legislative direction, these funds are granted to the Mississippi Humanities Council, which provides additional funding for interviews. Working with the Center for Oral History and Cultural Heritage, University of Southern Mississippi, the Humanities Council awards grants to local groups across the state to support oral history interviewing projects.

II. Program Objective:

To generate a body of primary source materials based on oral history interviews with Mississippians.

PROGRAM PERFORMANCE INDICATORS AND MEASURES
 Program Data Collected in Accordance with the Mississippi Performance Budget and Strategic
 Planning Act of 1994

MDAH/Statewide Oral History
 AGENCY NAME

1 - STATEWIDE ORAL HISTORY
 PROGRAM NAME

PROGRAM OUTPUTS: (This is the measure of the process necessary to carry out the goals and objectives of this program. This is the volume produced, i.e., how many people served, how many documents generated.)

	<u>FY 2013</u> <u>ACTUAL</u>	<u>FY 2014</u> <u>ESTIMATED</u>	<u>FY 2015</u> <u>PROJECTED</u>
1 All funds are granted to the Mississippi Humanities Council as per legislative direction.	0.01	0.00	0.00

PROGRAM EFFICIENCIES: (This is the measure of the cost, unit cost or productivity associated with a given outcome or output. This measure indicates linkage between services and funding, i.e., cost per investigation, cost per student or number of days to complete investigation.)

	<u>FY 2013</u> <u>ACTUAL</u>	<u>FY 2014</u> <u>ESTIMATED</u>	<u>FY 2015</u> <u>PROJECTED</u>
1	0.00	0.00	0.00
2	0.00	0.00	0.00
3	0.00	0.00	0.00

PROGRAM OUTCOMES: (This is the measure of the quality or effectiveness of the services provided by this program. This measure provides an assessment of the actual impact or public benefit of your agency's actions. This is the results produced, i.e., increased customer satisfaction by x% within a 12-month period, reduce the number of traffic fatalities due to drunk drivers within a 12-month period.)

	<u>FY 2013</u> <u>ACTUAL</u>	<u>FY 2014</u> <u>ESTIMATED</u>	<u>FY 2015</u> <u>PROJECTED</u>
1	0.00	0.00	0.00
2	0.00	0.00	0.00
3	0.00	0.00	0.00

PROGRAM 3% GENERAL FUND REDUCTION AND NARRATIVE EXPLANATION

MDAH/Statewide Oral History

	Fiscal Year 2014 Funding			FY 2014 GF PERCENT REDUCED
	Total Funds	Reduced Amount	Reduced Funding Amount	
Program Name: (1) STATEWIDE ORAL HISTORY				
GENERAL	50,000	(1,500)	48,500	(3.00%)
ST.SUPPORT SPECIAL				
FEDERAL				
OTHER SPECIAL				
TOTAL	50,000	(1,500)	48,500	
Narrative Explanation: A reduction of 3% would reduce funds granted to fund the Statewide Oral History Program.				
SUMMARY OF ALL PROGRAMS				
GENERAL	50,000	(1,500)	48,500	(3.00%)
ST.SUPPORT SPECIAL				
FEDERAL				
OTHER SPECIAL				
TOTAL	50,000	(1,500)	48,500	

MDAH BOARD OF TRUSTEES MEMBERS

MDAH/Statewide Oral History

Agency

A. Explain Rate and manner in which board members are reimbursed:

Generally, the members of the Board of Trustees have received no compensation, however under Section 39-5-3 of the MS Code, the Board members may receive compensation for the amount of their actual expenses incurred in attending board meetings.

B. Estimated number of meetings FY2014

Four (4) plus special meetings as needed.

C.	Names of Members	City, Town, Residence	Appointed By	Date of Appointment	Length of Term
1.	<u>Kane Ditto, President</u>	<u>Jackson, MS</u>	<u>See Section 39-5-3</u>	<u>01-01-2008</u>	<u>6 years</u>
2.	<u>Reuben Anderson</u>	<u>Jackson, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2010</u>	<u>6 years</u>
3.	<u>Nancy Carpenter</u>	<u>Columbus, MS</u>	<u>See Section 39-5-3</u>	<u>01/20/2012</u>	<u>2 years</u>
4.	<u>E. Jack Garner</u>	<u>Jackson, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2012</u>	<u>6 years</u>
5.	<u>Valencia Hall</u>	<u>Natchez, MS</u>	<u>See Section 39-5-3</u>	<u>10/28/2011</u>	<u>2 years</u>
6.	<u>Betsey Hamilton</u>	<u>New Albany, MS</u>	<u>See Section 39-5-3</u>	<u>01/28/2013</u>	<u>3 years</u>
7.	<u>Web Heidelberg</u>	<u>Hattiesburg, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2012</u>	<u>6 years</u>
8.	<u>Hilda Povall</u>	<u>Cleveland, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2010</u>	<u>6 years</u>
9.	<u>Roland Weeks</u>	<u>Biloxi, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2010</u>	<u>6 years</u>

Identify Statutory Authority (Code Section or Executive Order Number)*

Chapter 3, Section 39-5.1 – 39-5.23, Laws of Mississippi, MS Code 1972

*If Executive Order, please attach copy.

**SCHEDULE B
CONTRACTUAL SERVICES**

MDAH/Statewide Oral History

Name of Agency

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2013	(2) Estimated Expenses FY Ending June 30, 2014	(3) Requested for FY Ending June 30, 2015
A. TUITION, REWARDS & AWARDS (61010-61099)			
61010 Tuition			
61020 Employee Training			
TOTAL (A)			
B. TRANSPORTATION & UTILITIES (61100-61299)			
61110 Postage, Box Rent, etc.			
61122 Telephone - Basic Line Charges			
61123 Telephone - Universal Service Fund Fee			
61134 Telephone - Long Distance Service			
61142 Telephone - Private Line Charges			
611XX Transportation of Goods (61180-61190)			
61210 Electricity			
61220 Gas			
61230 Water & Sewage			
TOTAL (B)			
C. PUBLIC INFORMATION ((61300-61399)			
61310 Advertising & Public Information			
61340 Signs & Billboards			
61350 Exhibits & Displays			
TOTAL (C)			
D. RENTS (61400-61499)			
61420 Building & Floor Space			
61430 Land			
61440 Office Equipment			
61460 Other Equipment			
61470 Bureau of Buildings			
61480 Exhibits, Displays & Conference Rooms			
TOTAL (D)			
E. REPAIRS & SERVICES (61500-61599)			
61500 Grounds, Walks, Fences & Lots			
61520 Buildings			
61530 Machinery & Field Equipment			
61540 Passenger Vehicles			
61550 Office Equipment & Furniture			
61580 Shop Equipment			
61590 Miscellaneous Items of Equipment			
TOTAL (E)			
F. FEES, PROFESSIONAL & OTHER SERVICES (61600-61699)			
61610 Engineering			
61615 SAAS Fees - DFA			
61616 MMRS Fees			
61617 SPAHRS Fees - DFA			
61618 MERLIN Fees			
61620 Department of Audit			
6162X Accounting (61621 - 61624)			
6163X Legal (61630-61636)			
61650 State Personnel Board			
6165X Personnel Services Contracts (61651-61653)			

**SCHEDULE B
CONTRACTUAL SERVICES CONTINUED**

MDAH/Statewide Oral History

Name of Agency

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2013	(2) Estimated Expenses FY Ending June 30, 2014	(3) Requested for FY Ending June 30, 2015
F. FEES, PROFESSIONAL & OTHER SERVICES (61600-61699)			
61670 Laboratory & Testing Fees			
6168X Contract Worker (61682-61688)			
61690 Other Fees & Services			
TOTAL (F)			
G. OTHER CONTRACTUAL SERVICES (61700-61899)			
61700 Liability Insurance Pool Contributions (Tort Claims)			
61710 Insurance & Fidelity Bonds			
61715 Insurance Computer Equipment ITS			
61720 Membership Dues			
61721 Subscriptions			
TOTAL (G)			
H. INFORMATION TECHNOLOGY (61900-61990)			
61902 IS Fees - Outside Vendor			
61905 IS Fees - ITS			
6191X IS Training/Education (61914-61915)			
61917 Service Charges Paid to State Computer Center			
61918 Data Entry			
61921 Software Acquisition			
6193X IS Related Rentals (61932-61938)			
61961 Repair, Maintenance & Service of IS Equipment			
61962 Maintenance Repair of Communication Systems			
61971 Contract Maintenance of IS Equipment (Outside Vendor)			
61980 Software Maintenance			
TOTAL (H)			
I. OTHER (61991-61999)			
6199X Prior Year Expense (61997-61998)			
61999 Contractual Services - No PO Required			
TOTAL (I)			
GRAND TOTAL <i>(Enter on Line I-B of Form MBR-1)</i>			
FUNDING SUMMARY:			
GENERAL FUNDS			
STATE SUPPORT SPECIAL FUNDS			
FEDERAL FUNDS			
OTHER SPECIAL FUNDS			
TOTAL FUNDS			

**SCHEDULE C
COMMODITIES**

MDAH/Statewide Oral History
Name of Agency _____

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2013	(2) Estimated Expenses FY Ending June 30, 2014	(3) Requested for FY Ending June 30, 2015
A. MAINTENANCE & CONSTR. MATERIALS & SUPPLIES (62010-62099)			
62040 Lumber Parts			
62050 Steel & Other Metals			
62060 Paints			
Total (A)			
B. PRINTING & OFFICE SUPPLIES & MATERIALS (62100-62199)			
62110 Printing Binding			
62120 Duplication & Reproduction Supplies			
62130 Office Supplies & Materials			
62140 Paper Supplies			
62160 Office Equipment (not capital outlay)			
Total (B)			
C. EQUIPMENT REPAIR PARTS, SUPPLIES & ACCES. (62200-62299)			
62210 Fuels - Gasoline			
62251 Repair Vehicle			
62270 Radio & TV Supply & Repair			
62290 Other Equipment Repair Parts			
Total (C)			
D. PROFESSIONAL & SCI. SUPPLIES AND MATERIALS (62300-62399)			
62330 Photographic Supplies			
62340 Drugs & Chemicals - Medical & Lab Use			
62390 Other Professional Scientific Supplies & Materials			
Total (D)			
E. OTHER SUPPLIES & MATERIALS (62400-62999)			
62420 Hardware, Plumbing & Electrical			
62450 Janitor Supplies & Cleaning			
62460 Wearing Material			
62470 Food			
62520 Decal Signs			
62530 Uniforms & Wearing Apparel			
62555 IS Equipment Repair Parts			
62590 Other Supplies & Materials			
62595 Other Equipment (less than \$500)			
Total (E)			
GRAND TOTAL (A, B, C, D & E) <i>(Enter on Line I-C of Form MBR-1)</i>			
FUNDING SUMMARY:			
GENERAL FUNDS			
STATE SUPPORT SPECIAL FUNDS			
FEDERAL FUNDS			
OTHER SPECIAL FUNDS			
TOTAL FUNDS			

**SCHEDULE D-1
CAPITAL OUTLAY
OTHER THAN EQUIPMENT**

MDAH/Statewide Oral History
Name of Agency _____

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2013	(2) Estimated Expenses FY Ending June 30, 2014	(3) Requested for FY Ending June 30, 2015
A. LANDS (63100-63199)			
63110 Land for Buildings			
63120 Land for Right-of-Way			
63130 Land for Aggregates			
63170 Land Purchased for Other Purposes			
TOTAL (A)			
B. BUILDINGS & IMPROVEMENTS (63200-63299)			
63250 Buildings - Purchased, Constructed, Remodeled			
TOTAL (B)			
C. INFRASTRUCTURE & OTHER (63500-63999)			
635XX Other			
TOTAL (C)			
GRAND TOTAL <i>(Enter on Line I-D-1 of Form MBR-1)</i>			
FUNDING SUMMARY:			
GENERAL FUNDS			
STATE SUPPORT SPECIAL FUNDS			
FEDERAL FUNDS			
OTHER SPECIAL FUNDS			
TOTAL FUNDS			

**SCHEDULE D-2
CAPITAL OUTLAY EQUIPMENT**

MDAH/Statewide Oral History

Name of Agency _____

EQUIPMENT BY ITEM	Act. FY Ending June 30, 2013		Est. FY Ending June 30, 2014		Req. FY Ending June 30, 2015		
	No. of Units	Total Cost	No. of Units	Total Cost	No. of Units	Cost Per Unit	Total Cost
A. VEHICLES (see form MBR-1-D-3)							
E. EQUIPMENT - LEASE PURCHASE (63460-63476)							
634XX Lease Purchases							
TOTAL (E)							
GRAND TOTAL (Enter on Line I-D-2 of Form MBR-1)							
FUNDING SUMMARY:							
GENERAL FUNDS							
STATE SUPPORT SPECIAL FUNDS							
FEDERAL FUNDS							
OTHER SPECIAL FUNDS							
TOTAL FUNDS							

**SCHEDULE D-3
PASSENGER/WORK VEHICLES**

MDAH/Statewide Oral History

Name of Agency _____

MINOR OBJECT OF EXPENDITURE	Vehicle Inventory June 30, 2013	FY Ending June 30, 2013		FY Ending June 30, 2014		FY Ending June 30, 2015	
		No. of Vehicles	Actual Cost	No. of Vehicles	Estimated Cost	No. of Vehicles	Requested Cost
A. PASSENGER & WORK VEHICLES (63310, 63390-63400)							
63310 Passenger, Basic Economy							
63310 Passenger, Basic Sporty							
63310 Passenger, Entry Level							
63310 Passenger, Lower Middle							
63310 Passenger, Traditional Large							
63310 Passenger, Upper Middle							
63310 Passenger, Upper Middle Specialty							
63390 Truck, Compact Pickup							
63390 Truck, Fullsize Pickup							
63390 Truck, Fullsize Utility							
63390 Truck, Midsize Pickup							
63391 Truck, Heavy Duty Station Wagon							
63391 Truck, Heavy Duty Trucks							
63392 Truck, Mini Sport Utility							
63392 Truck, Sport Utility							
63393 Truck, Fullsize Van (Cargo)							
63393 Truck, Minivan (Cargo)							
63393 Truck, Minivan (Passenger)							
63393 Truck, Window Van (Passenger)							
63400 Other Vehicles							
TOTAL (A)							
B. BETTERMENTS OR ACCESSORIES FOR VEHICLES (63395)							
63395 Betterments or Accessories for Vehicles							
TOTAL (B)							
GRAND TOTAL <i>(Enter on Line I-D-3 of Form MBR-1)</i>							
FUNDING SUMMARY:							
GENERAL FUNDS							
STATE SUPPORT SPECIAL FUNDS							
FEDERAL FUNDS							
OTHER SPECIAL FUNDS							
TOTAL FUNDS							

**SCHEDULE D-4
WIRELESS COMMUNICATION DEVICES**

MDAH/Statewide Oral History
Name of Agency _____

MINOR OBJECT OF EXPENDITURE	Device Inventory June 30, 2013	Act FY Ending June 30, 2013		Est FY Ending June 30, 2014		Req FY Ending June 30, 2015	
		No. of Devices	Actual Cost	No. of Devices	Estimated Cost	No. of Devices	Requested Cost
A. CELLULAR PHONES (63435)							
63435 Cellular Phones							
Total (A)							
B. PAGERS (63434)							
63434 Pagers, Paging Equipment							
Total (B)							
C. WIRELESS PERSONAL DIGITAL ASSISTANTS (63435)							
63435 Wireless PDAs, Blackberry, etc							
Total (C)							
GRAND TOTAL <i>(Enter on Line I-D-4 of Form MBR-1)</i>							
FUNDING SUMMARY:							
GENERAL FUNDS							
STATE SUPPORT SPECIAL FUNDS							
FEDERAL FUNDS							
OTHER SPECIAL FUNDS							
TOTAL FUNDS							

**SCHEDULE E
SUBSIDIES, LOANS & GRANT**

MDAH/Statewide Oral History
Name of Agency _____

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2013	(2) Estimated Expenses FY Ending June 30, 2014	(3) Requested for FY Ending June 30, 2015
A. SCHOOL GRANTS TO COUNTIES & MUNICIPALITIES (64000-64599)			
TOTAL (A)			
B. GRANTS TO L.H.L. & OTHER POLITICAL SUBDIVISIONS (64600-64699)			
TOTAL (B)			
C. GRANTS TO NON-GOVERNMENT INSTNS & INDS (64700-64999)			
64790 Grants to Non-Governmental Institutions	50,000	50,000	50,000
TOTAL (C)	50,000	50,000	50,000
D. DEBT SERVICE & JUDGEMENTS (65000-65399)			
65040 Interest on Lease Purchases			
TOTAL (D)			
E. OTHER (66000-89999)			
TOTAL (E)			
GRAND TOTAL <i>(Enter on Line I-E of Form MBR-1)</i>	50,000	50,000	50,000
FUNDING SUMMARY:			
GENERAL FUNDS	50,000	50,000	50,000
STATE SUPPORT SPECIAL FUNDS			
FEDERAL FUNDS			
OTHER SPECIAL FUNDS			
TOTAL FUNDS	50,000	50,000	50,000

**NARRATIVE
2015 BUDGET REQUEST**

MDAH/Statewide Oral History _____
Name of Agency

We are requesting general funds in the amount of \$50,000 in the category of Subsidies, Loans and Grants to continue this program in FY2015.

**OUT-OF-STATE TRAVEL
FISCAL YEAR 2013**

MDAH/Statewide Oral History _____

Agency Name

Note: All expenditures recorded on this form must be totaled and said total must agree with the out-of-state travel amount indicated for FY 2013 on Form Mbr-1, line I.A.2.b.

Employee's Name	Destination	Purpose	Travel Cost	Funding Source

Total Out of State Travel Cost

FEES, PROFESSIONAL AND OTHER SERVICES
(EXPENDITURE CODES 61600-61699)

MDAH/Statewide Oral History

Name of Agency

TYPE OF FEE AND NAME OF VENDOR	Retired w/ PERS	(1) Actual Expenses FY Ending June 30, 2013	(2) Estimated Expenses FY Ending June 30, 2014	(3) Requested for FY Ending June 30, 2015	Fund Num.
61610 Engineering					
TOTAL 61610 Engineering					
61615 SAAS Fees - DFA					
TOTAL 61615 SAAS Fees - DFA					
61616 MMRS Fees					
TOTAL 61616 MMRS Fees					
61617 SPAHRS Fees - DFA					
TOTAL 61617 SPAHRS Fees - DFA					
61618 MERLIN Fees					
TOTAL 61618 MERLIN Fees					
61620 Department of Audit					
TOTAL 61620 Department of Audit					
6162X Accounting (61621 - 61624)					
TOTAL 6162X Accounting (61621 - 61624)					
6163X Legal (61630-61636)					
TOTAL 6163X Legal (61630-61636)					
61650 State Personnel Board					
TOTAL 61650 State Personnel Board					
6165X Personnel Services Contracts (61651-61653)					
TOTAL 6165X Personnel Services Contracts (61651-61653)					
61670 Laboratory & Testing Fees					
TOTAL 61670 Laboratory & Testing Fees					
6168X Contract Worker (61682-61688)					
TOTAL 6168X Contract Worker (61682-61688)					
61690 Other Fees & Services					
TOTAL 61690 Other Fees & Services					
GRAND TOTAL (61600-61699)					

VEHICLE PURCHASE DETAILS

MDAH/Statewide Oral History _____

Name of Agency

Year	Model	Person(s) Assigned To	Vehicle Purpose/Use	Replacement or New?	FY2015 Req. Cost
				New	0
					<hr/>
					0
TOTAL VEHICLE REQUEST					0

**VEHICLE INVENTORY
AS OF JUNE 30, 2013**

MDAH/Statewide Oral History _____

Name of Agency

Veh. Type	Vehicle Descript.	Model Year	Model	Person(s) Assigned To	Purpose/Use	Tag Number	Mileage On 6-30-13	Average Miles per Year	Replacement Proposed	
									FY 2014	FY 2015

Vehicle Type = Passenger/Work

CAPITAL LEASES

MDAH/Statewide Oral History

Name of Agency

Vendor/ Item Leased	Original Date of Lease	Original Number of Months of Lease	Number of Months Remaining on 6-30-13	Last Payment Date	Interest Rate	Amount of Each Payment			Total of Payments to be Made								
						Principal	Interest	Total	Actual FY 2013	Estimated FY 2014			Requested FY 2015				
										Principal	Interest	Total	Principal	Interest	Total		
/	//	0	0	//	.000												

Summary of 3% General Fund Program Reduction to FY2014 Appropriated Funding by Major Object

MDAH/Statewide Oral History

Major Object	FY2014 GENERAL FUND REDUCTION	EFFECT ON FY2014 STATE SUPPORT SPECIAL FUNDS	EFFECT ON FY2014 FEDERAL FUNDS	EFFECT ON FY2014 OTHER SPECIAL FUNDS	TOTAL 3% REDUCTIONS
PERSONAL SERVICES					
TRAVEL					
CONTRACTUAL SERVICES					
COMMODITIES					
OTHER THAN EQUIPMENT					
EQUIPMENT					
VEHICLES					
WIRELESS COMM. DEVICES					
SUBSIDIES, LOANS, ETC	(1,500)				(1,500)
TOTALS	(1,500)				(1,500)