

Sutter County A-87 Cost Plan

Departmental Questionnaire

For Fiscal Year Ended _____

Department _____

How much did your department receive in federal grants? \$ _____

How much did your department receive in state grants? \$ _____

Please list the capital assets purchased with federal grant money and the amounts.

_____ \$ _____
_____ \$ _____

Attach additional pages if necessary.

Please list the capital assets purchased with state grant money and the amounts.

_____ \$ _____
_____ \$ _____

If your department is a non-general fund department or only a partial general fund department and your department transferred monies to the general fund to pay for any capital assets please list the capital assets purchased and the amounts. (This section does not apply to general fund departments)

_____ \$ _____
_____ \$ _____

If there are any outstanding issues regarding the A-87 Cost Plan charges for the year just ended you would like to discuss, please list your concern(s).

If there are any concerns regarding the allocation of square footage of your department, please list your concern(s).

Please list any changes in your fund/department that would affect the allocation basis of your fund/department (new programs or departments/functions moved).

If your fund/department manages and/or receives 100% of revenues of a special revenue or agency fund, please list them.

Name

Date