

## **INSTRUCTIONS GOVERNING EXPENDITURE PLANS AND ALLOTMENTS FISCAL YEAR 2016**

Instructions for Expenditure Plans and Allotments for FY 16 contained in this document are generally similar to those issued for FY 15.

Each department shall submit the following:

1. An operational expenditure plan (OEP) for each appropriation account authorized by Act 119, SLH 2015, and a separate narrative page indicating program objectives and activities as related to the OEP.
2. A **Form A-19** for each appropriation account from the OEP.
3. A Request for Transfer of Funds (**Form A-21**) for all transfers proposed in the department's OEP, as applicable.
4. A summary of collective bargaining (CB) allocations by fund, appropriation symbol, act, and Included/Excluded. Totals should be provided by fund. (**Form CB**)

### **I. Operational Expenditure Plans**

Each department shall submit an initial expenditure plan for each program for which funds have been appropriated pursuant to Act 119, SLH 2015. The Department of Budget and Finance (B&F) shall review the expenditure plans and allotment requests shall generally be approved on the basis of such plans. Expenditure plans for specific appropriations are not required.

A. Expenditure plan submissions shall consist of the following:

1. One copy of the expenditure plan which shows the quarterly outlay of funds for the appropriation account by personal services, other current expenses, equipment, motor vehicles and financing agreements. (See Sample 1.)
2. A separate narrative page indicating program objectives and activities. The initiation of any authorized new programs or the improvement of existing services shall be identified separately in the narrative.

This narrative should include data indicating what is to be done, how much is to be done, and other pertinent information relating to activities in each quarter. Utilize measures of work units wherever possible.

The narrative should support and be consistent with the OEP. B&F may request any supplemental information which it deems necessary to properly review and evaluate departmental plans. (See Sample 2.)

B. Operational Expenditure Plan format

1. **Appropriation Column** – Show the amounts by cost element in Act 119, SLH 2015, and as reflected in your operating budget details.
2. **Current Restriction Column** – Indicate the portion of departmental restriction assigned to the program. Enter restriction amounts by cost element.
3. **Net Transfers** - Should reflect the net result of any transfers in or out of the program based on anticipated or approved Form A-21s and transfers between the cost elements in the program. (See Sample 1.) Use plus or minus signs to show the direction of the transfers. Do not use parentheses to indicate a transfer out.

The transfers should be reflected only in Columns 3 (net transfers) and 4 (current allocation). Do not show transfers in the appropriation column.

4. **Current Allocation** – In total, the figures in this column should equal your net allocation, i.e., if all of your department's OEPs were summarized, the allocation column total should equal your net departmental allocation.

Any difference between the allocation and planned expenditure program total columns is assumed to be departmental savings or deficits.

5. **Collective Bargaining** – Appropriation acts for implementation of CB for FY 16 are as follows:

CB allocations to departments:

- Act 54, SLH 2015 - Bargaining Unit (BU) 2
- Act 55, SLH 2015 - BUs 3, 4 and 14
- Act 56, SLH 2015 - BU 5
- Act 119, SLH 2015 - BU 7
- Act 60, SLH 2015 - BU 9

CB allocations to B&F only for Hawaii Employer-Union Health Benefits Trust Fund:

- Act 57, SLH 2015 - BUs 1 and 10
- Act 59, SLH 2015 - BU 8
- Act 58, SLH 2015 - BU 11

Enter the allocations from these Acts on Line 2 (CB - All) and Line 5 (Other Cost Items - All), if applicable. It is not necessary to separate the CB amounts by Included and Excluded on the OEP; however, the breakdown by BU and by Included and Excluded must be shown on the back of the full-year A-19.

6. **Financing Agreements** – Enter on Line 3 of the OEP all funds for financing agreements as defined in Executive Memorandum (E.M.) No. 96-17. If the funds were budgeted (i.e., submitted in the budget request process on Tables BK), the amounts should be entered in the Appropriations, Allocation, and in the appropriate fiscal quarter columns. (See Sample 1.)

If the funds for the financing agreement are unbudgeted (i.e., not submitted on Tables BK in the budget process), enter the amount in the Net Transfer column indicating the movement from the appropriate cost element, the Allocation column and the affected fiscal quarter columns. Do not enter the amount in the Appropriation column. (See Sample 3.) A financing agreement may be unbudgeted because: 1) a financing agreement was not anticipated as the vehicle to acquire a budgeted item; or 2) an unbudgeted item is being funded through program savings and is being acquired through a financing agreement.

Regardless of the cost element of the item being acquired through the financing agreement, all amounts should be combined on Line 3 and included in the Total Appropriation lines and on Line 9. Do not include financing agreements on any other line of the OEP.

- C. Amended expenditure plans are not required with each revised allotment request unless requested by the B&F analyst assigned to your department. Only initial and fiscal year-end expenditure plans must be submitted.
- D. Please circle the line number of each line of data on your amended expenditure plan that is being changed since the last submittal. A change means: 1) a change to any of the amounts on the line; 2) adding in data on a line that was previously blank; or 3) deleting an entire line of data. (See Sample 4.)

## **II. Request for Allotment (Form A-19)**

Requirements for the Allotment Request forms are as follows:

1. Each department shall request allotment of funds appropriated or authorized by program; by "10" Personal Services or "20" Other Current Expenses (including Financing Agreements); by funds; and by quarters using Request for Allotment (Form A-19). (See Samples 5 and 7.) The breakdowns for Personal Services and Other Current Expenses (including Financing Agreements) must match your department's operating budget (BJ and BK) details, unless transfers were identified in your OEP.
2. **Restriction** – Enter amount of departmental restriction assigned to program, as applicable, by cost element. The 5% restriction, the 5% contingency restriction and other allocation adjustments (including vacation payouts), as applicable, should be broken out separately in the A-19.

3. **Financing Agreements** – Enter all funds for financing agreements, as defined in E.M. No. 96-17, as a separate line item under Other Current Expenses in the Appropriation and other applicable columns.

Enter unbudgeted financing agreements in the Allocation and applicable quarterly allotment columns; do not enter them in the Appropriation column. See Item B.6 above for an explanation of budgeted and unbudgeted financing agreements.

Do not consolidate these financing agreement line items into the Personal Services or Other Current Expenses lines on subsequent amendments to the A-19.

4. Each Form A-19 should reflect a single appropriation account.
5. Each allotment form should reflect the proper appropriation Act and year of authorization in the space provided. The program ID associated with each appropriation symbol must be shown on the Form A-19 in the space labeled, "Program I.D."
6. Only amounts appropriated or authorized by Act 119, SLH 2015, or other specific appropriation Acts are to be reflected in Column 2, "Appropriation."
7. Reflect transfers, including CB allocations, separately in Column 4 (Allocation for this Fiscal Year) and the applicable quarterly allotment columns. CB should be identified in Column 1 (Allotment Category Description) as "CB – All, Other Salary Adjustments" and "CB – All, Other Cost Items." All transfers should be identified as "Trf . . ."
8. Trust, Federal Fund and Other Federal Fund accounts authorized by Act 119, SLH 2015, will not be subject to reversion. An "N" should be placed in the reversion column of the Form A-19 for these accounts.
9. Upon approval of the expenditure plans and Form A-21s, allotments shall be made for all quarters subject to a quarterly review of the availability of funds.
10. The Comptroller shall maintain control over departmental expenditures to ensure that expenditures shall not exceed the amounts allotted and shall not honor vouchers against program appropriations which have not been allotted.

Only trust, federal fund and other federal fund allotments may exceed authorized appropriation levels with Governor's approval. All other funds may be allotted only up to the authorized amounts in Act 119, SLH 2015, except as otherwise provided by general law.

11. Additional fund authorizations provided in the Appropriations Act or other specific appropriation Acts are to be reflected in Column 4 and the applicable quarterly allotment columns. The description should be identified in Column 1 as "Addt'l. Auth."

12. Each type of adjustment must be shown on a separate line when submitting an amended allotment request. Do not combine them into one adjustment item.

Subsequent requests should reflect the totals for Personal Services and Other Current Expenses from the latest approved Form A-19.

13. Full-year allotment requests must be accompanied by an OEP and any other supplemental information requested by B&F. A Request for Transfer of Funds (Form A-21) must be concurrently submitted, as applicable. All required documentation must be submitted as a unit.

Subsequent requests for amended allotments shall be submitted with written justifications on the reverse side of the Form A-19 and any other information as required by B&F. Amended OEPs are not required with amended allotment requests unless requested by the B&F analyst assigned to your department.

Improperly submitted Form A-19s or incomplete submissions will be returned without action. Departments should consult with the appropriate B&F analyst for further clarification of the reporting format.

14. With the exception of the Department of Education and the University of Hawaii, pursuant to Chapter 37, HRS, all aspects of departmental allotment requests shall be reviewed, evaluated and approved by the Director of Finance to ensure consistency with sound fiscal management practices.
15. A FAMS Award Record ID number shall be noted on the Request for Allotment (Form A-19) for operating and referenced in the CIP allotment request involving federal funds.
16. Each department with federal funds should refer to the B&F memorandum previously sent to their department, "Assignment of Appropriation Symbols for FY 16 Federal Awards," which includes procedures for federal fund allotment requests. Policies and procedures regarding the management of federal funds are posted on [federalawards.hawaii.gov](http://federalawards.hawaii.gov).

### **III. Summary of Collective Bargaining Allocation**

1. Provide a breakdown of your CB allocations by program ID, by Included and Excluded and by means of financing. (See Sample 8.)
2. Prepare a separate table for each means of financing. You may delete columns for Acts which do not apply to your department.
3. The appropriation symbol is the account into which the CB funds should be deposited.

Attachments: Samples 1, 2, 3, 4, 5, 6, 7, and 8

## REPORT # OBBEXP1

FISCAL YR: 16  
PROGRAM ID: HRD:91  
TABLE-ID: A  
PROGRAM TITLE: SUPPORTING SERVICES

STATE OF HAWAII  
OPERATIONAL EXPENDITURE PLAN  
2015-16

## SAMPLE 1

DEPARTMENT OF HUMAN RESOURCES DEVELOPMENT

DATE: 21-Sep-15

C R D	PROGRAM REQUIREMENTS	T R	APPROPRIATION 2015-16	CURRENT RESTRICTION 2015-16	NET TRANSFERS 2015-16	CURRENT ALLOCATION 2015-16	PLANNED EXPENDITURE PROGRAM			PLANNED EXPENDITURE PROGRAM TOTAL
							1ST QTR	2ND QTR	3RD QTR	
1. PERSONAL SVCS (PAYROLL)			98,4240	98,424	885,816	221,454	221,454	221,454	221,454	885,816
2. ALL CB, OTHER SALARY ADJS					15,000	3,750	3,750	3,750	3,750	15,000
3. FINANCING AGREEMENTS			15,000	1,500		13,500	3,375	3,375	3,375	13,500
4. OTHER CURRENT EXPENSES			532,259	53,226		479,033	119,758	119,758	119,758	479,033
5. OTHER COST ITEMS - ALL					400	100	100	100	100	400
6. EQUIPMENT			1,250	125		1,125		700	425	0
7. MOTOR VEHICLE					0					0
C R D	TOTAL APPROPRIATION FUND YR APPR DEPT	T R	A P A A	R MOF						
8.	G 16 191	P	A	11.00	1,532,749	153,275	0	1,394,874	348,437	349,137
9.	G 16 191	P	A	1,532,749	153,275	0	1,394,874	348,437	349,137	348,438
	TOTAL APPROPRIATION				1100	153,275	0	1,394,874	348,437	349,137
					1,532,749					1,394,874

**SAMPLE 2****OPERATIONAL EXPENDITURE PLAN FOR FISCAL YEAR 2016**Program ID: **HMS 225**Program Title: **Private Housing Development and Ownership**

**Program Objectives:** To assist low and moderate-income individuals and families in purchasing a home by augmenting the available supply of reasonably priced dwelling units and by making available down payment loans, mortgage loans and other home financing methods.

1. Conduct discussions with developers, community associations, and governmental agencies concerning proposals for housing developments
2. Evaluate the financial geographical, marketing, and construction aspects of each proposal, and select those projects most consistent with the program objectives.
3. Control the development costs and construction of the project scheduled to begin during the fiscal year.
4. Secure mortgage funds and other financial assistance from the federal, state, and private sector to supplement the current sources of funds.

	<u>1st Qtr</u>	<u>2nd Qtr</u>	<u>3rd Qtr</u>	<u>4th Qtr</u>
1)	No. of participation loans processed	0	0	0
2)	No. of development loans processed	2	2	2
3)	No. of single-family dwelling units planned for construction	188	187	188
4)	No. of multi-family dwelling units planned for construction	375	375	375

REPORT # OBBEXP1

FISCAL YR: 16

**STATE OF HAWAII  
OPERATIONAL EXPENDITURE PLAN  
2015-16**

SAMPLE 3



TO: DIRECTOR, DEPARTMENT OF BUDGET AND FINANCE  
 Request is hereby made for approval of the following allotments:

**STATE OF HAWAII  
 REQUEST FOR ALLOTMENT**

DEPARTMENT Human Resources Development  
 APPROPRIATION SYMBOL G-16-191-P  
 X-X-X-XXXX-XX

DEPARTMENT OF BUDGET AND FINANCE  
 Act 119, SLH 2015  
 HRD 191 - Supporting Services

**APPROPRIATION TITLE AND ACT NO. OR LAW  
 PROGRAM I.D. NO. AND TITLE**

**SAMPLE 5**

COMPTROLLER'S NO. \_\_\_\_\_ DATE \_\_\_\_\_  
 DEPT. NO. \_\_\_\_\_ MM/DD/YY  
 OR AMENDMENT NO. \_\_\_\_\_

General  
 FUND

DEPT. NO.  
 ORIGINAL X

SIGNATURE  
 MEANS OF FINANCING

ALLOTMENT CATEGORY DESCRIPTION	APPROPRIATION	RESTRICTED	ALLOCATION FOR THIS FISCAL YEAR	ALLOTMENT FOR QUARTER JULY-SEPT	ALLOTMENT FOR QUARTER OCT-DEC	ALLOTMENT FOR QUARTER JAN-MAR	ALLOTMENT FOR QUARTER APR-JUNE	ESTIMATED BALANCE JUNE 30, 20
Personal Services Restriction Contingency Restriction CB - All, other salary adjustments	984,240	49,212 49,212	885,816 15,000	221,454 3,750	221,454 3,750	221,454 3,750	221,454 3,750	221,454 3,750
<b>10 - Personal Services</b>	<b>984,240</b>	<b>98,424</b>	<b>900,816</b>	<b>225,204</b>	<b>225,204</b>	<b>225,204</b>	<b>225,204</b>	<b>225,204</b>
Other Current Expenses Restriction Contingency Restriction CB - All, other cost items Financing Agreements	533,509 15,000	26,675 1,500	480,159 13,500	120,040 3,375	120,040 3,375	120,040 3,375	120,040 3,375	120,039 3,375
<b>20 - Other Current Expenses</b>	<b>548,509</b>	<b>54,850</b>	<b>494,059</b>	<b>123,515</b>	<b>123,515</b>	<b>123,515</b>	<b>123,515</b>	<b>123,514</b>
	<b>1,532,749</b>	<b>153,274</b>	<b>1,394,875</b>	<b>348,719</b>	<b>348,719</b>	<b>348,719</b>	<b>348,719</b>	<b>348,718</b>

**ALLOTMENT ADVICE**

TO THE HEAD OF THE DEPARTMENT NAMED ABOVE:  
 Please be advised that the following allotments have been approved.  
 Expenditures incurred during each allotment period must be restricted to the amounts approved.

DIRECTOR, DEPARTMENT OF BUDGET AND FINANCE  
 BY DIRECTION OF THE GOVERNOR

DATE \_\_\_\_\_

APPROPRIATION	ALLOTMENT	ALLOT CAT	1ST QUARTER AMOUNT xxxxxxxxxxxx	2ND QUARTER AMOUNT xx TC xxxxxxxxxx	3RD QUARTER AMOUNT xx TC xxxxxxxxxx	4TH QUARTER AMOUNT xx TC xxxxxxxxxx	ALLOTMENTS REVERSIONS
APPROPRIATION EST/ INCREASE TC xxxxxxxxx xx	RESTRICTION INCREASE TC xxxxxxxxx xx	10 511	225,204 00	512	225,204 00	513	225,204 00
<b>411</b>	<b>431</b>	<b>10 515</b>		<b>516</b>		<b>517</b>	<b>518</b>
APPROPRIATION DECREASE TC xxxxxxxxx xx	RESTRICTION DECREASE TC xxxxxxxxx xx	20 511	123,515 00	512	123,515 00	513	123,514 00
<b>412</b>	<b>432</b>	<b>20 515</b>		<b>516</b>		<b>517</b>	<b>518</b>

INSTRUCTIONS: Prepare in triplicate and submit all copies to the Department of Budget and Finance.  
 State copy on the reverse side the necessity for requesting amended allotment. Requests for capital outlays must be itemized.

STATE ACCOUNTING FORM A-19  
 JANUARY 1, 2000 (REVISED)

## **SAMPLE 6**

(Note to A-19 Preparer - type the Collective Bargaining breakdown by act and by included and excluded, on the back of the A-19. Include any allocations for other cost items in this breakdown also. In the sample below, the total corresponds to the \$15,000 in salary adjustments and \$400 in other cost items on the A-19)

Act xxx/2015	
Included	10,900
Excluded	<u>4,500</u>
	<u>15,400</u>

TO: DIRECTOR, DEPARTMENT OF BUDGET AND FINANCE  
 Request is hereby made for approval of the following allotments:

DEPARTMENT Human Resources Development  
 APPROPRIATION SYMBOL G-16-191-P  
 X-XX-XXX-XX

STATE OF HAWAII  
**REQUEST FOR ALLOTMENT**

General  
 FUND

APPROPRIATION TITLE AND ACT NO. OR LAW Act 122, SLH 2014  
 PROGRAM I.D. NO. AND TITLE HRD 191 - Supporting Services

10 - Personal Services	984,240	98,424	900,816	225,204	225,204	225,204	225,204
Other Current Expenses	533,509	53,350	480,159	120,040	120,040	120,040	120,039
Amendment - Transfer to Financing Agreements			-17,000				-17,000
Financing Agreements	15,000	1,500	13,500	3,375	3,375	3,375	3,375
Amendment - Transfer from Other Current Exp.			17,000				17,000
<b>20 - Other Current Expenses</b>	<b>548,509</b>	<b>54,850</b>	<b>493,659</b>	<b>123,415</b>	<b>123,415</b>	<b>123,415</b>	<b>123,414</b>
	<b>1,532,749</b>	<b>153,274</b>	<b>1,394,475</b>	<b>348,619</b>	<b>348,619</b>	<b>348,619</b>	<b>348,618</b>

MEANS OF FINANCING

SIGNATURE

ALLOTMENT CATEGORY DESCRIPTION	APPROPRIATION	RESTRICTED	FISCAL YEAR	ALLOTMENT FOR THIS JULY-SEPT	ALLOTMENT FOR QUARTER	ALLOTMENT FOR QUARTER OCT-DEC	ALLOTMENT FOR QUARTER JAN-MAR	ALLOTMENT FOR QUARTER APR-JUNE	ESTIMATED BALANCE JUNE 30, 20 E V
Personal Services	984,240	98,424	900,816	225,204	225,204	225,204	225,204	225,204	
10 - Personal Services	984,240	98,424	900,816	225,204	225,204	225,204	225,204	225,204	
Other Current Expenses	533,509	53,350	480,159	120,040	120,040	120,040	120,040	120,039	
Amendment - Transfer to Financing Agreements			-17,000					-17,000	
Financing Agreements	15,000	1,500	13,500	3,375	3,375	3,375	3,375	3,375	
Amendment - Transfer from Other Current Exp.			17,000					17,000	
<b>20 - Other Current Expenses</b>	<b>548,509</b>	<b>54,850</b>	<b>493,659</b>	<b>123,415</b>	<b>123,415</b>	<b>123,415</b>	<b>123,415</b>	<b>123,414</b>	
	<b>1,532,749</b>	<b>153,274</b>	<b>1,394,475</b>	<b>348,619</b>	<b>348,619</b>	<b>348,619</b>	<b>348,619</b>	<b>348,618</b>	

ALLOTMENT ADVICE

TO THE HEAD OF THE DEPARTMENT NAMED ABOVE:  
 Please be advised that the following allotments have been approved.  
 Expenditures incurred during each allotment period must be restricted to the amounts approved.

DATE \_\_\_\_\_ MM/DD/YY  
 DEPT. NO. \_\_\_\_\_ OR AMENDMENT NO. \_\_\_\_\_ 1

APPROPRIATION		ALLOTMENT	1ST QUARTER AMOUNT CAT TC xxxxxxxxx	2ND QUARTER AMOUNT TC xxxxxxxxx	3RD QUARTER AMOUNT TC xxxxxxxxx	4TH QUARTER AMOUNT TC xxxxxxxxx	ALLOTMENT REVERSIONS	
APPROPRIATION EST/ INCREASE	RESTRICTION INCREASE	ALLOT EST/ INCREASE	10 511	512	513	514	TC	REVERSION DECREASE xxxxxx
TC xx xxxxxxxx	TC xx xxxxxxxx	TC xx xxxxxxxx					TC	xxxxxx
411	431	ALLOT DECREASE	10 515	516	517	518	593	
APPROPRIATION DECREASE	RESTRICTION DECREASE	ALLOT EST/ INCREASE	20 511	512	513	514	593	
TC xx xxxxxxxx	TC xx xxxxxxxx	TC xx xxxxxxxx						
412	432	ALLOT DECREASE	20 515	516	517	518		

INSTRUCTIONS: Prepare in triplicate and submit all copies to the Department of Budget and Finance.  
 State fully on the reverse side the necessity for requesting amended allotment. Requests for capital outlays must be itemized.

STATE ACCOUNTING FORM A-19  
 JANUARY 1, 2000 (REVISED)

**SUMMARY OF FY 16 COLLECTIVE BARGAINING ALLOCATION**  
Department of Agriculture

## Means of Financing: A