

INSTRUCTIONS GOVERNING EXPENDITURE PLANS AND ALLOTMENTS FISCAL YEAR 2017

Instructions for Expenditure Plans and Allotments for FY 17 contained in this document are generally similar to those issued for FY 16.

Each department shall submit the following:

1. An operational expenditure plan (OEP) for each appropriation account authorized by Act 119, SLH 2015, as amended by Act 124, SLH 2016, 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, as amended by Act 124, SLH 2016. 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, as amended by Act 124, SLH 2016, 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 17 are as follows:

CB allocations to departments:

- Act 54, SLH 2015 - Bargaining Unit (BU) 2
- Act 55, SLH 2015 - BUs 3 and 4
- Act 56, SLH 2015 - BU 5
- Act 60, SLH 2015 - BU 9
- Act 49, SLH 2016 - BU 11
- Act 50, SLH 2016 - BU 14
- Act 51, SLH 2016 - BU 8
- Act 119, SLH 2015, as amended by Act 124, SLH 2016 - BU 7

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

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

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% 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, as amended by Act 124, SLH 2016, 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, as amended by Act 124, SLH 2016, 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, as amended by Act 124, SLH 2016, 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 "Add'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) may 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 Federal Awards Management System 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, "Assignment of Appropriation Symbols for FY 17 Federal Awards," to be sent under separate cover, which includes procedures for federal fund allotment requests. Policies and procedures regarding the management of federal funds are posted on 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

STATE OF HAWAII
OPERATIONAL EXPENDITURE PLAN
2016-17

SAMPLE 1

FISCAL YR: 17
PROGRAM ID: HRD191
TABLE-ID: A

DEPARTMENT OF HUMAN RESOURCES DEVELOPMENT

DATE: 21-Sep-16

PROGRAM TITLE: SUPPORTING SERVICES

C	T	R	APPROPRIATION 2015-16	CURRENT RESTRICTION 2015-16	NET TRANSFERS 2015-16	CURRENT ALLOCATION 2015-16	1ST QTR	2ND QTR	3RD QTR	4TH QTR	PLANNED EXPENDITURE PROGRAM TOTAL
1.			1,007,727	50,386		957,341	239,335	239,335	239,335	239,336	957,341
2.						15,000	3,750	3,750	3,750	3,750	15,000
3.			15,000	750		14,250	3,562	3,562	3,562	3,564	14,250
4.			532,259	26,613		505,646	126,412	126,412	126,412	126,410	505,646
5.						400	100	100	100	100	400
6.			1,250	63		1,187	700	487		0	1,187
7.						0					0
=====											
C			1,556,236	77,812	0	1,493,824	373,159	373,859	373,646	373,160	1,493,824
R											
D											
=====											
8.	G	17	191	P	A						
=====											
9.	G	17	191	P	A						
=====											
			11.00								
			1,556,236	77,812	0	1,493,824	373,159	373,859	373,646	373,160	1,493,824
=====											
			11.00								
			1,556,236	77,812	0	1,493,824	373,159	373,859	373,646	373,160	1,493,824
=====											

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	0
2) No. of development loans processed	2	2	2	2
3) No. of single-family dwelling units planned for construction	188	187	188	187
4) No. of multi-family dwelling units planned for construction	375	375	375	375

REPORT # OBBEXP1

STATE OF HAWAII
OPERATIONAL EXPENDITURE PLAN
2016-17

SAMPLE 3

FISCAL YR: 17
PROGRAM ID: HRD191
TABLE-ID: A
PROGRAM TITLE: SUPPORTING SERVICES

DEPARTMENT OF HUMAN RESOURCES DEVELOPMENT
DATE: 20-Jun-17

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	4TH QTR	
1.	PERSONAL SVCS (PAYROLL)		1,007,727	50,386		957,341	239,335	239,335	239,335	239,336	957,341
2.	ALL CB, OTHER SALARY ADJS					15,000	3,750	3,750	3,750	3,750	15,000
3.	FINANCING AGREEMENTS		15,000	750	17,000	31,250	7,813	7,813	7,813	7,811	31,250
4.	OTHER CURRENT EXPENSES		532,259	26,613	-18,250	487,396	121,849	121,849	121,849	121,849	487,396
5.	OTHER COST ITEMS - ALL					400	100	100	100	100	400
6.	EQUIPMENT		1,250	63	1,250	2,437	700	487	487	1,250	2,437
7.	MOTOR VEHICLE					0					0

C R D	TOTAL APPROPRIATION	T R	FUND YR APPR DEPT	MOF	1,556,236	77,812	0	1,493,824	372,847	373,547	373,334	374,096	1,493,824
8.	G 17 191 P	A			11.00								
9.	G 17 191 P	A			1,556,236	77,812	0	1,493,824	372,847	373,547	373,334	374,096	1,493,824
	TOTAL APPROPRIATION				11.00	77,812	0	1,493,824	372,847	373,547	373,334	374,096	1,493,824

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

STATE OF HAWAII
REQUEST FOR ALLOTMENT

SAMPLE 5

DEPARTMENT Human Resources Development
APPROPRIATION SYMBOL G-17-191-P
X-XX-XXX-XX

COMPTROLLER'S NO. XXXXXXXXXX
DEPT. NO.

DATE MM/DD/YY

APPROPRIATION TITLE AND ACT NO. OR LAW Act 124, SLH 2016
PROGRAM I.D. NO. AND TITLE HRD 191 - Supporting Services

ORIGINAL X OR AMENDMENT NO.
SIGNATURE

ALLOTMENT CATEGORY DESCRIPTION	APPROPRIATION	RESTRICTED	ALLOCATION FOR THIS FISCAL YEAR	MEANS OF FINANCING				ESTIMATED BALANCE JUNE 30, 20
				ALLOTMENT FOR QUARTER JULY-SEPT	ALLOTMENT FOR QUARTER OCT-DEC	ALLOTMENT FOR QUARTER JAN-MAR	ALLOTMENT FOR QUARTER APR-JUNE	
Personal Services Restriction	1,007,727	50,386	957,341	239,335	239,335	239,335	239,336	R E V
CB - All, other salary adjustments			15,000	3,750	3,750	3,750	3,750	
10 - Personal Services	1,007,727	50,386	972,341	243,085	243,085	243,085	243,086	
Other Current Expenses Restriction	533,509	26,676	506,833	126,412	127,112	126,899	126,410	
CB - All, other cost items Financing Agreements	15,000	750	400	100	100	100	100	
			14,250	3,562	3,562	3,562	3,564	
20 - Other Current Expenses	548,509	27,426	521,483	130,074	130,774	130,561	130,074	
	1,556,236	77,812	1,493,824	373,159	373,859	373,646	373,160	

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

APPROPRIATION	ALLOT CAT	ALLOTMENT	1ST QUARTER AMOUNT		2ND QUARTER AMOUNT		3RD QUARTER AMOUNT		4TH QUARTER AMOUNT		ALLOTMENT REVERSIONS
			TC	XX	TC	XX	TC	XX	TC	XX	
APPROPRIATION EST/ INCREASE	XX	TC	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	REVERSION DECREASE
RESTRICTION INCREASE	XX	TC	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
411		431									593
APPROPRIATION DECREASE	XX	TC	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	
RESTRICTION DECREASE	XX	TC	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	
412		432									593

INSTRUCTIONS: Prepare in duplicate and submit all copies to the Department of Budget and Finance.
State fully on the reverse side the necessary 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 124/2016	Included	10,900
	Excluded	<u>4,500</u>
		15,400

