

**Early Literacy Support Block (ELSB) Grant 12-1-2020 to 6-30-2021** **Year-to-Date (YTD) Expenditures and Progress Report**  
**ELSB Grant Program - Planning Year (12/01/2020 - 06/30/2021) Expenditures**

California Department of Education (CDE)  
 Educator Excellence and Equity Division  
 ELSB Grant Program  
 1430 N Street, Suite 4309, Sacramento, CA 95814

**Please Note:** The Local Educational Agency (LEA) information and the Budget and Expenditure Amounts will autopopulate from the LEA Info and Narrative Form. Please select the correct check box for #4, #17, and #18.

**1. Grant Award No.:** 20-25515-68213-00 **Total Grant Award:** \$613,140.00

**2. LEA:** Mountain Empire Unified School District

**3. Project Director:** Christi Martelli **Phone:** (619) 478-5930 **Due 04/30/21**  
 (12/01/20 - 03/31/21)

**FAX Number:** (619) 478-5963 **E-mail:** christi.martelli@meusd.k12.ca.us **Due 07/30/21**  
 (04/01/21 - 06/30/21)

**4. Reporting Time Frame (Select One)**

1st Report  
 2nd Report  
 3rd Report  
 4th Report

<b>Standardized Account Code Structure</b>	Resource Code: 7810
	Revenue Object Code: 8590

Object Code	Planning Year Budget	1st PERIOD		2nd PERIOD		3rd PERIOD		4th PERIOD		CUMULATIVE TOTAL Total of All Periods
		Expenditure	Balance	Expenditure	Balance	Expenditure	Balance	Expenditure	Balance	
1000-1999 Certificated Salaries/Stipends	6,000.00					183.20	5,816.80	3,000.00	2,816.80	3,183.20
2000-2999 Classified Salaries	0.00					0.00	0.00	0.00	0.00	0.00
3000-3999 Employee Benefits	1,277.00					35.95	1,241.05	128.70	1,112.35	164.65
4000-4999 Books and Supplies	0.00					0.00	0.00	0.00	0.00	0.00
5000-5999 Services and Other Operating Expenditures	0.00					0.00	0.00	0.00	0.00	0.00
5200 Participant Travel/Project Staff Travel	0.00					0.00	0.00	0.00	0.00	0.00
5800 Professional/Consulting Services and Operating Expenses	0.00					0.00	0.00	0.00	0.00	0.00
<b>SUBTOTAL</b>	<b>7,277.00</b>					<b>219.15</b>	<b>7,057.85</b>	<b>3,128.70</b>	<b>3,929.15</b>	<b>3,347.85</b>
7300-7399 Indirect Costs	293.00					9.00	284.00	132.00	152.00	141.00
5100 Subagreement for Services	0.00					0.00	0.00	0.00	0.00	0.00
6000-6599 Capital Outlay	0.00					0.00	0.00	0.00	0.00	0.00
<b>TOTAL</b>	<b>7,570.00</b>					<b>228.15</b>	<b>7,341.85</b>	<b>3,260.70</b>	<b>4,081.15</b>	<b>3,488.85</b>

**17. Budget Revision Requested (10% rule)**  Yes  No

Check the box that applies.  
 A Budget Revision is required for changes over 10 percent on any line item (either an under expenditure or over expenditure).  
 If yes is checked, a Budget Revision Request and Justification forms must be attached for review and approval.

**18.**  Activities are being conducted as planned.  
 Activities are not being conducted as planned.  
 Check the box that applies.

This is to certify that the YTD Expenditures and Progress Report has been prepared in accordance with the applicable Federal and State regulations. To the best of my knowledge, the data contained in this report are true and accurate. Any program results are supported by documented deliverables (i.e., professional development/products) on file at the LEA.

**19.**

Project Coordinator (Printed Name and Signature)	Date
<i>Gary Hebelman / Gary Hebelman</i>	12/14/21
Fiscal Agent (Printed Name and Signature)	Date
Other Signature, if required (Printed Name and Signature)	Date

  

CDE Fiscal Monitor's Approval	Date
CDE Project Monitor's Approval	Date
CDE Administrator's Approval	Date

**20.**