

TABLE 17
PATERNITY ESTABLISHMENT
FOR CHILDREN REVIEWED DURING 2007

Paternity Established	Children	Age 0-5	Age 6-12	Age 13-15	Age 16+
Yes, established	2,219	712	694	329	484
Yes & Rights Terminated	397	132	162	48	55
Yes, Rights Relinquished	245	85	91	40	29
Yes & Father deceased	<u>121</u>	<u>14</u>	<u>29</u>	<u>29</u>	<u>49</u>
TOTAL IDENTIFIED	2,982	943	976	446	617
No, Paternity Not Est.	460	224	110	54	72
No, Parental ID Unknown	<u>271</u>	<u>95</u>	<u>70</u>	<u>39</u>	<u>67</u>
TOTAL NOT IDENTIFIED	731	319	180	93	139
UNDOCUMENTED	<u>93</u>	<u>17</u>	<u>16</u>	<u>18</u>	<u>42</u>
GRAND TOTAL	3,806	1,279	1,172	557	798

Paternity and Young Children (children under age 6)

- **24.9% (319 of the 1,279 young children) did not have paternity established**
 - 121 of the children had been in care between 12-23 months (1 year)
 - 63 of the children had been in care between 24-35 months (2 years)
 - 22 of the children had been in care for 36 months or more (3 years or more)
 - 6 of the 22 children had no purported father identified, and paternity had not been established by publication.

Of the 2,668 reviewed children who had been foster care for 12 months or more:

- 529 (19.8%) did not have paternity established or did not have a father/purported father identified.
- 25 (0.9%) had no file documentation about paternity establishment.

When considering children with no paternity established or whose paternity is undocumented, it is likely that paternity has not been established for over a fifth of the children reviewed (824 of 3,806 – 21.7 %).

Explanation of Table– The Board conducted 5,458 reviews on 3,806 children during 2007. Some children receive more than one review during a calendar year. In the above table rather than duplicating those children, the paternity status as of the last review in 2007 was used.

Lack of paternity identification has been linked to excessive lengths of time in care for children. Often paternity is not addressed until after the mother's rights are relinquished or terminated instead of addressing the suitability of the father as placement concurrently with the assessment of the mother's ability to parent. This can cause serious delays in children achieving permanency.

TABLE 18
MONTHS IN FOSTER CARE FOR
CHILDREN REVIEWED DURING 2007

Months In Care	Children Reviewed	Ages 0-5	Ages 6-12	Ages 13-15	Ages 16-18
0-6 months	458	230	112	66	50
7-12 months	759	321	215	94	129
13-18 months	556	216	156	78	106
19-24 months	519	213	183	61	62
25-30 months	352	136	119	36	61
31-36 months	307	86	105	40	76
37-40 months	111	21	44	22	24
41-48 months	213	37	95	32	49
49+ months	<u>531</u>	<u>19</u>	<u>143</u>	<u>128</u>	<u>241</u>
Totals	3,806	1,279	1,172	557	798

- **2,033 (53.4%) of the 3,806 reviewed children have spent more than 18 months of their lives in foster care.** This includes:
 - 512 preschool children (birth- age 5),
 - 689 elementary school aged children (ages 6-12),
 - 319 middle school/junior high aged children (ages 13-15), and
 - 513 youth age 16 and older who will soon become adults and create families of their own.
- **855 (22.5%) of the reviewed children and youth have spent over 3 years of their lives in foster care.**
- **531 (14.0%) children and youth have spent over 4 years of their lives in foster care.**

Explanation of Table— The Board conducted 5,458 reviews on 3,806 children during 2007. Some children receive more than one review during a calendar year. In the above table rather than duplicating those children, the months in care as of the last review in 2007 was used. This table shows the number of months of the child's life that has been spent in foster care.

TABLE 19

**PROVISION OF HEALTH RECORDS
TO THE CAREGIVERS
FOR CHILDREN REVIEWED DURING 2007**

Health Records Given to Foster Parent or Caregiver	Total Reviews		Ages 0- 5	Ages 6-12	Ages 13-15	Age 16+
Yes	3,521	64.5%	1,335	1,179	469	538
No	320	5.9%	119	114	44	43
Unable to determine	1,465	26.8%	461	435	247	322
Not applicable	<u>152</u>	<u>2.8%</u>	<u>12</u>	<u>11</u>	<u>21</u>	<u>108</u>
Total	5,458	100.0%	1,927	1,739	781	1,011

This is based on the reviews conducted for children in this age group. Some children are reviewed more than once in a year, and each of their 2007 reviews would be counted in the above table.

There is a correlation between children experiencing multiple caseworker changes and health records not being communicated to their caregivers:

61.8% of the cases where health records were not provided involved children who had four or more case managers over their lifetime.

60.9% of the cases where it was unable to be determined if health records were provided involved children who had four or more case managers over their lifetime.

The Board also documents when children's DHHS files contain medical records, and when they do not.

- In 3,582 (65.6%) of the 5,458 reviews conducted in 2007, the DHHS file contained medical information.

Explanation of Table– The Foster Care Review Board is required under federal regulations to determine if health records had been provided to the foster parents or other care providers at the time of the placement. This is done for all reviews and noted for the legal parties in the Board's recommendation report.

TABLE 20

**PROVISION OF EDUCATION RECORDS
TO THE CAREGIVERS
FOR CHILDREN REVIEWED DURING 2007**

For the chart on education records below, only reviewed children ages 6-15 are included, as all of these children should be of school age.

Education Records Given to Foster Parent or Caregiver	Reviews of School Aged Children		Children Ages 6-12	Children Ages 13-15
Yes	1,626	64.5%	1,158	468
No	162	6.4%	118	44
Unable to Determine	689	27.3%	441	248
Not applicable	43	1.7%	22	21
Total	2,520	100.0%	1,739	781

This is based on the reviews conducted for children in this age group. Some children are reviewed more than once in a year, and each of their 2007 reviews would be counted in the above table.

There is a correlation between children experiencing multiple caseworker changes and education records not being communicated to their caregivers:

61.1% of the cases where education records were not provided involved children who had four or more case managers over their lifetime.

65.6% of the cases where it was unable to be determined if education records were provided involved children who had four or more case managers over their lifetime.

The Board also documents when children's DHHS files contain educational records, and when they do not.

- In 1,536 (61.1%) of the 2,520 reviews of children ages 6-15 conducted in 2007, the DHHS file contained education information.

Explanation of Table– The Foster Care Review Board is required under federal regulations to determine if educational records had been provided to the foster parents or other care providers at the time of the placement. This is done for all reviews and noted for the legal parties in the Board's recommendation report.

TABLE 21

2007 FACTS ON MINORITY CHILDREN IN NEBRASKA'S CHILD WELFARE SYSTEM

Minority children as a percent of those in foster care on December 31st.

Race	Number of Children	Percent
White	2,957	58.6%
Black	929	18.4%
Hispanic as race	482	9.6%
American Indian	339	6.7%
Asian	27	0.5%
Multiple designations	95	1.9%
Other or Race Not Reported	<u>214</u>	<u>4.2%</u>
Total	5,043	100.0%

- 18.2% of the Nebraska children were minority according to Census data reported in the 2006 Kids Count report.
- On December 31, 2007, 41.4% of the children in out-of-home care were minority.

Minority children and placement moves while in foster care.

Race	Number of Children	1-3 placements	4-6 placements	7-9 placements	10 or more placements
American Indian, not hispanic	339	152	66	38	83
Asian, not hispanic	27	16	6	1	4
Black, not hispanic	929	373	229	129	198
White, not hispanic	2957	1474	656	344	483
Other, not hispanic	182	92	45	21	24
Hispanic	482	247	114	49	72
Multi-Racial	95	57	21	7	10
Unidentified Race	<u>32</u>	<u>26</u>	<u>6</u>	<u>0</u>	<u>0</u>
Totals	5,043	2,437	1,143	589	874

The following are the percent of children within a racial category above who experienced four or more placement changes over their lifetime:

- 59.8% of the Black children.
- 55.2% of the American Indian children.
- 50.2% of the White children.
- 48.8% of the Hispanic children
- 40.0% of the children of multi-racial background.

TABLE 21 (cont.)

Minority children and times in foster care.

Children in care on December 31, 2007

Race	Number of Children	1st time in care	% for this race	Been in care before	% for this race
Black, not hispanic	929	523	56.3%	406	43.7%
American Indian, not hispanic	339	198	58.4%	141	41.6%
Hispanic	482	293	60.8%	189	39.2%
White, not hispanic	2957	1842	62.3%	1115	37.7%
Other, not hispanic	182	117	64.3%	65	35.7%
Unidentified Race	32	24	75.0%	8	25.0%
Multi-Racial	95	73	76.8%	22	23.2%
Asian, not hispanic	<u>27</u>	<u>22</u>	81.5%	<u>5</u>	18.5%
	5,043	3,092		1,951	

Minority children and time in foster care since most recent removal.

Children in care on December 31, 2007, by Consecutive Time in Foster Care Since Last Removal From the Home

Race	In Care For Less Than a Year	In Care For 1 Year	In care for 2-4 Years	In Care for 5 years or longer	Total Children
American Indian, not hispanic	175	67	76	21	339
Asian, not hispanic	14	7	5	1	27
Black, not hispanic	502	204	181	42	929
White, not hispanic	1652	665	524	116	2957
Other, not hispanic	103	40	35	4	182
Hispanic	299	88	82	13	482
Multi-Racial or Unidentified Race	<u>62</u>	<u>27</u>	<u>35</u>	<u>3</u>	<u>127</u>
Totals	2,807	1098	938	200	5,043

% of children in care on December 31, 2007, who had been in care for over one year

Multiple Race	51.2%
American Indian	48.4%
Black	46.0%
White	44.1%
Hispanic	38.0%

TABLE 22

PARENTAL SUBSTANCE ABUSE IN CASES OF CHILDREN REVIEWED IN 2007

Parental substance abuse

The following chart shows the number of children who entered care due to any form of parental substance abuse, including alcohol abuse and the abuse of prescriptions and/or street drugs.

Age group	Entered Care Due to Parental Substance Abuse	Children reviewed	Percent
Under 2	199	334	59.6%
2-3 yrs	290	516	56.2%
4-5 yrs	235	429	54.8%
6-8 yrs	316	580	54.5%
9-12 yrs	277	592	46.8%
13-18 yrs	<u>366</u>	<u>1,355</u>	<u>27.0%</u>
Total	1,683	3,806	44.2%

Parental methamphetamine abuse

The following chart shows the number of children who entered care due to parental methamphetamine abuse. These parents may also be abusing other substances as well.

Age group	in care due to parental meth abuse	# of children reviewed this age	% in care due to meth
Under 2 yrs	136	334	40.7%
2-3 years	182	516	35.3%
4-5 years	135	429	31.5%
6-10 years	247	902	27.4%
11-18 years	<u>190</u>	<u>1625</u>	11.7%
Total	890	3,806	23.4%

Explanation of Table— The tables above show the frequency of parental substance abuse as a factor in the cases of children reviewed during 2007.

TABLE 23

2007 SELECTED FACTS ON CHILDREN IN NEBRASKA'S CHILD WELFARE SYSTEM

Number of children in foster care

There were 5,043 children in foster care on December 31, 2007.

- This is a decrease of 143 children from the 5,186 in foster care on December 31, 2006.
- This was an increase of 83 children from the 4,960 children in foster care on December 31, 1997.

Number of reviews conducted

- Local boards conducted about as many reviews in 2007 as in 2006 (5,458 in 2007, 5,473 in 2006).

Ratio of females/males

The ratio of males/females in out-of-home care has remained constant during the last 10 years (about 56% male, 44% female).

Children in foster care soon to become adults

There were 384 youth age 18 in out-of-home care on December 31, 2007.

Average days in foster care

Children who were in out-of-home care on December 31, 2007, had been in foster care an average of 524 days since their most recent removal from the home. For children who have had more than one removal, this does not include previous episodes in foster care. The average is over one year in out-of-home care for all age groups, except for the age unreported who have recently entered foster care.

Age birth to five	398 days
Age 6-12	569 days
Age 13-15	561 days
Age 16-18	572 days
Age unreported	176 days
Age 0-18	524 days on average

Percent of lifetime in foster care

Children reviewed in 2007 averaged having spent 34.7% of their life in foster care.

TABLE 23 (continued)

Aggravated circumstances

Aggravated circumstances (reasons that a court could use as grounds to find that efforts to reunify are not necessary, such as torture, sexual abuse, felonious assault of the child or a sibling) were present for 319 (6.0%) of 5,292 reviews conducted in 2007. (This information was not collected for all children reviewed in 2007).

For children age birth through five, aggravated circumstances were present for 117 (6.1%) of 1,906 reviews.

[Editors note: due in part to additional training on identifying when aggravated circumstance are present, by the first half of 2008, 8.0% of the cases were identified as having such circumstances.]

Permanency hearings

There were 3,452 reviews conducted in 2007 that involved children who had been in foster care for 12 consecutive months or longer.

- 1,043 of the 3,452 children had permanency hearings. 680 of these were held with review hearings.
- 396 of the 3,452 children did not have a permanency hearing. A request for such a hearing was documented for 140 of the 396 children.
- For 2,013 of the 3,452 children there was no file documentation of the hearing, or the documentation was unclear.

For the 1,043 children who had permanency hearings...

- In 947 cases the judge rule that there was a need to file a TPR
- In 52 cases it was unable to determine what the judge made.
- In 44 cases the judge made another ruling

Also for the 1,043 children who had permanency hearings...

- In 571 cases the plan submitted by DHHS was in the child's best interests.
- In 340 cases the plan was not in the best interests.
- In 132 cases it was unable to determine if the plan was in the best interests.

Please list current and past activities (you can use an additional sheet if more room is needed).

Please list the name, address, and phone number of three references.

1. _____
2. _____
3. _____

Please write a short paragraph of why you would like to serve on a local Foster Care Review Board.

FOR OFFICE USE ONLY:

Date application received _____

Part I Training _____ Part II Training _____

Date appointed to Board _____ Appointed to Board _____

NEBRASKA STATE FOSTER CARE REVIEW BOARD
521 S. 14th Street, Suite 401
Lincoln, NE 68508-2707
(402) 471-4420

Child Abuse/Neglect Central Register Release of Information

I hereby apply to serve on the Foster Care Review Board. I hereby give my permission and authorize any law enforcement agency, child protective service agency, governmental agency, or court to release to the State Foster Care Review Board, its agents or representatives, any documents, records, or other information pertaining to me.

I understand my name will be checked against the Nebraska Department of Health and Human Services Adult/Child Protective Services Central Registers. The purpose of this check will be to determine if my name is being maintained on either register as a result of previous abuse/neglect allegations that have been investigated and have not been determined to be unfounded. To the best of my knowledge, I do not have a conviction or prior history of adult or child abuse/neglect or maltreatment perpetration, neither have I been convicted of a crime involving moral turpitude.

I understand that my refusal to authorize the release of the above-mentioned information may adversely affect my application to serve as a member of the Foster Care Review Board.

I hereby authorize the Nebraska Department of Health and Human Services to release specific and detailed information contained on the Adult or Child Protective Services Central Register including the information that a record has been found to:

The State Foster Care Review Board
521 S. 14th, Suite 401
Lincoln NE 68508

Signature _____ Date

Current Address _____ City _____ State _____ How Long? _____

Current Employer _____ How Long? _____

Printed Name _____ Birth Date _____ Social Security Number

Other Names Used in Past Twenty (20) Years →
(Please Print or Type)
Use back of sheet if necessary

- 1. _____
- 2. _____
- 3. _____

- 1. _____
- 2. _____
- 3. _____

Other Addresses Used in Past Twenty (20) Years
(Please Print or Type)
Use back of sheet if necessary

Names of Children Who Have Lived With You →
in Past Twenty (20) Years (Please Print or Type)
Use back of sheet if necessary

- 1. _____
- 2. _____
- 3. _____

Other addresses, other names, other children residing with you (continued from front page of the form, if necessary):

Appendix C

ACKNOWLEDGEMENTS – 2007

The State Foster Care Review Board would like to acknowledge and thank the following churches, schools, hospitals, libraries, businesses, and community centers for allowing the local Foster Care Review Boards to use their facilities for monthly board meetings, prospective board member training programs, and on-going continuing education programs:

Alliance Public Library, Alliance
Bergan Mercy Hospital, Omaha
Carol Yokum Resource Center, Lincoln
Christ United Methodist Church, Lincoln
Columbus Police Department, Columbus
Dundee Elementary School, Omaha
First Lutheran Church, South Sioux City
Fremont Presbyterian Church, Fremont
Hastings Police Department, Hastings
Immanuel Alegent Hospital, Omaha
Independent Living Center, Grand Island
Landmark Center, Hastings
LaVista Community Center, LaVista
Law Enforcement Center, Kearney
Lexington Public Library
Liberty Elementary School, Omaha
Lutheran Church of the Master, Omaha

Madonna Rehabilitation Center, Lincoln
Make-A-Wish Offices, Omaha
New Life Baptist Church, Bellevue
North Platte Community College, North
Platte
Pacific Hills Lutheran Church, Omaha
Presbyterian Church of the Cross, Omaha
Regional West Medical Center, Scottsbluff
St. Andrews Episcopal Church, Omaha
St. John's Lutheran Church, Tecumseh
St. Paul's United Methodist Church,
Lincoln
St. Wenceslaus Catholic Church, Omaha
State Office Building, Omaha
Sump Memorial Library, Papillion
United Lutheran Church, Lincoln
United Methodist Church, Norfolk
York General Hospital, York

Appendix D

PROJECT PERMANENCY QUESTIONS

BOARD MEMBER QUESTIONS FOR FOSTER PARENTS

FCRB Home Visit of the _____ home

Child's Name _____ Age _____

Board members _____ & _____

Date _____ Time _____ AM PM

[Be sure that the opening statement has been read]

Key Information About The Child

1. What date was _____ placed in your home? _____

2. When he/she was placed with you, did you receive adequate information regarding:

the child's development	Yes	No
the child's educational needs	Yes	No
the child's medical needs	Yes	No
if the child has allergies	Yes	No
any diet considerations		
such as which formula	Yes	No

3. What do you understand is the current plan for the child?
 (*on sheet in the pocket of the binder*)

01-Reunification	02-Kinship Care
03-Adoption	04-Long Term Foster Care
11-Guardianship	00-Unreported/unknown
Other: _____	

4. Can you tell me about the child's temperament, personality, and response to stress?

Grief

Research clearly shows that in foster children ages birth through five, most of their behaviors are a result of the grief they experienced because they have been separated from their parents or from a trusted caregiver. Research shows this grief can last for many years.

1. What information, if any, have you been given about childhood grief? What questions do you have about how children respond to separation from parents or from trusted caregivers?
(Refer to section _____)

2. Next I'll be asking you about some behaviors that are typical of grief. This will help us, on the Board, to better understand what the child's needs are and will help us make better recommendations. Is the child showing...

Regressive behaviors (soiling self when formerly toilet trained, return to baby talk, use of pacifier when previously weaned, etc.).....Yes No

Not listening or spacey behaviorsYes No

Sleep Disturbances.....Yes No

Food issues (hoarding, refusal to eat).....Yes No

Rhythmic behavior (rocking self excessively.).....Yes No

Rages beyond normal tantrums.....Yes No

Bothered by nothing – flat emotions.....Yes No

Impulse control weak for their ageYes No

Lack of energyYes No

Over active, without a physical cause.....Yes No

- Overly clingingYes No
- Too affectionate with strangers.....Yes No
- Intense control battlesYes No
- Significant learning delays.....Yes No
- Destructive to selfYes No
- Destructive to othersYes No
- Refuses touch or comforting.....Yes No

3. How do you decide which of the child’s behaviors need to be responded to, and how do you to respond to those behaviors?

Services to the Child

- 1. What is the child’s daily routine?

- 2. Is the child in daycare or an early childhood program?

Day Care	Yes	No
Program	Yes	No

- 3. Has the child received a comprehensive health assessment since being placed in your home?

Yes	No
-----	----

- 4. Are the child’s immunizations up to date?

Yes	No	Partial
-----	----	---------

- 5. When was the child’s last visit to the doctor? _____
 - 1. Who was present at the appointment? _____

2. Are there any other children in the home? Who are they?

1. _____ Age _____
Foster child? Yes No If yes, when Placed _____

2. _____ Age _____
Foster child? Yes No If yes, when Placed _____

3. _____ Age _____
Foster child? Yes No If yes, when Placed _____

4. _____ Age _____
Foster child? Yes No If yes, when Placed _____

5. _____ Age _____
Foster child? Yes No If yes, when Placed _____

3. Are you a daycare provider? Yes No
If so, for how many children? _____

4. Are there any disabled adults in the home? Yes No
If so, how many? _____

5. Do you have respite care available? Is the quality of the respite care acceptable?

Training, Experience

1. How many years have you been a foster placement? _____

2. Has anyone talked to you about basic child development and what is to be expected as “normal” at each stage of growth? Yes No
(refer to page ___)

Contact with Legal Parties

1. When was the last time the case manager was at your home? _____
How much contact does the child have with the case manager?

2. When was the last time the child's guardian ad litem was at your home?
How much contact do you or the child have with the guardian ad litem?
(refer to page _____ for GAL definition, to contact page for name)

Other Questions or Comments

Do you have any other concerns that you want the board to be aware of?

Thank you

“Thank you for assisting the Board. At the end of the binder is an envelope containing some coupons that local sponsors have given us to say “thank you” for your service.

If you think of anything you would like to add or have any other questions, please feel free to contact us. The Board's information is on the contact sheet in the inside pocket of the binder.”

Appendix E

Group Home Information Visit Questions

Youth Detention, Group Home, or other facility questions:

Facility

- What is the Capacity of your facility? How full is it usually?
- What age range of youth are commingled?
- What is the percentage of minority youth?
- How young a child will be admitted here?
 - What is the age limit?
- Please describe what will occur when a youth is admitted?
 - How long is the youth allowed to stay?
- Describe contact with family, friends, etc.
- Will the youth be given a copy of rules, consequences for certain behaviors, etc.
- What programs and services are available to the youth?
- How is discipline be handled?
 - Will there be a time out room and what criteria will there be for placing a youth there.
 - Is there a policy limiting the amount of time a youth can be there?
 - Is the main focus of the facility on control or on positive guidance?
 - Are handcuffs or shackles used for discipline?
 - What is the most common method of discipline?
- How are serious incidents (suicide, assaults) handled?
 - How often do they occur?
 - Is law enforcement contacted?
- Does a citizen advisory board exist to monitor the facility, educate the public, recommended appropriate changes?
- Do you report to the Foster Care Review Board?
- Are children assessed before being accepted to the respite care program?

Staff

- What are the qualifications of the staff?
- What type of training do they receive?
- What is the staff to youth ratio?

- Are social workers, psychologists, certified teachers on staff and available to individual youth at convenient hours?
- Is medical care available at all times? Weekends? Who supervises medications?
- Who supervises the children who are here for respite care?
How long do they usually stay?
- What opportunity kids have for interaction with staff? Is there any counseling, one on one consultation, etc.

Education

- What is a typical day's schedule?
Are waking hours filled with productive activities?
- Is the school accredited? By whom?
How many hours are spent in class work?
Are School Materials forwarded from children's schools?
- During the education hours when are they in the classroom, and when in recreation?
How much pure education time do they get per day or week?
Where will the teachers come from?
- Is there a library? When will they go the the library?
- Exactly where will they be when they're not in classrooms or lunch? Locked in their room? TV room? Any other activities?. Will they go outside? Where?
- What will they do on weekends? Any organized activity? When in rooms?

APPENDIX F

STAFF WHO SERVED DURING SOME OR ALL OF 2007

Carolyn K. Stitt, Executive Director

Kathleen Stolz, Program Coordinator

Lincoln Area Supervisor

Michele Blodgett

Omaha Supervisor

Tammy Peterson

Rural-West Supervisor

Tami Gangwish

***Lincoln Area
Review Staff***

Terra Bentley
Jodi Borer
Michele Blodgett
Cheryl Johnson
Tony Menard
Nikki Swope
Lynda Todd
Jessie Zuniga

***Omaha
Review Staff***

Rachael Andrews
Erin Bader
Benjamin Gray
Anna Nelson
Tammy Oswald
Stacey Sothman
Pauline Williams

***Rural-West
Review Staff***

Terra Bentley
Jolie Camden
Karen Olsen
Dawn Paulsen
Sarah Schwartz
Ramona Tarin

Heidi Ore, Administrative Coordinator Linda Cox, Special Projects/Data Coordinator

Lincoln Office Staff

Brooke Celemnts
Lydia Daniel
Pat Kuhns
Dora May
Nickole Morehart
Holly Powell
Abby Webben

Student Interns

Sam Ballard

CONSULTANTS DURING 2007

Dr. Ann Coyne, Bonding & Attachment Advisor
Karen Kilgarin, Communication Advisor
Nancy Thompson, LMHP, Bonding & Attachment Advisor

APPENDIX G
STATE FOSTER CARE REVIEW BOARD
FINANCIAL STATEMENT

Fiscal Year 2006-2007

Appropriations

General Fund	\$1,280,541.00
Cash Fund	\$6,000.00
Federal Funds	<u>\$380,000.00</u>
TOTAL	\$1,666,541.00

Expenditures

Staff Salaries & Benefits	\$1,350,931.10
Postage	\$32,260.63
Telephone and Communications	\$36,918.43
Data Processing Fees	\$3,740.87
Publications and Printing	\$28,274.94
Rent	\$56,478.72
Legal Fees	\$13,979.65
Office Supplies & Miscellaneous	\$20,975.32
Travel Expenses	<u>\$54,383.79</u>
TOTAL	\$1,649,099.13

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