

**TITLE III ALLOCATIONS & REQUIRED MATCH
FY24**

County or Program	Total III B Federal	Total III B State	Total III B	15% Required Match of B**
Anderson	28,737.00	16,567.00	45,304.00	5,071.24
Bourbon	29,698.00	18,390.00	48,088.00	5,240.82
Boyle	32,931.00	24,519.00	57,450.00	5,811.35
Clark	34,765.00	27,999.00	62,764.00	6,135.00
Estill	28,620.00	16,346.00	44,966.00	5,050.59
Fayette	72,510.00	110,945.00	183,455.00	12,795.88
Franklin	39,134.00	36,282.00	75,416.00	6,906.00
Garrard	29,378.00	17,782.00	47,160.00	5,184.35
Harrison	30,280.00	19,494.00	49,774.00	5,343.53
Jessamine	38,813.00	35,675.00	74,488.00	6,849.35
Lincoln	33,950.00	26,452.00	60,402.00	5,991.18
Berea	26,134.00	30,594.00	56,728.00	4,611.88
Richmond	26,134.00	30,594.00	56,728.00	4,611.88
Mercer	31,416.00	21,648.00	53,064.00	5,544.00
Nicholas	24,339.00	8,228.00	32,567.00	4,295.12
Powell	25,970.00	11,321.00	37,291.00	4,582.94
Scott	35,930.00	30,208.00	66,138.00	6,340.59
Woodford	31,416.00	21,648.00	53,064.00	5,544.00
BGCAP	31,075.00	47,548.00	78,623.00	5,483.82
Case Mgmt	15,000.00		15,000.00	2,647.06
Ombudsman	29,000.00		29,000.00	5,117.65
Legal	26,830.00		26,830.00	4,734.71
Totals	702,060.00	552,240.00	1,254,300.00	123,892.94

AGENCY/COUNTY: _____

Cost sharing/matching requirements must be met for the Title III and Title VII programs and reflected on this page. The information provided should follow the guidelines set forth in Title 45, Part 92.

Administration on Aging - LOCAL RESOURCES INCLUDING REQUIRED MATCH

Source of Match (Who provides match)	Item of Match or Resource (Describe what it is)	III-B Program Income	C1 Program Income	C2 Program Income	III-B Local Cash	C1 Local Cash	C2 Local Cash	III-B Local In-Kind	C1 Local In-Kind	C2 Local In-Kind
Program Participants/Clients										
Cities										
Lawrenceburg, Paris, Danville, Winchester, Lexington, Frankfort, Cynthiana, Nicholasville, Berea, Richmond, Harrodsburg, Burgin, Carlisle, Georgetown, Versailles, Midway										
Counties										
Anderson, Bourbon, Boyle, Clark, Fayette, Franklin, Garrard, Harrison, Jessamine, Lincoln, Madison, Mercer, Nicholas, Powell, Scott, Woodford										
United Way										
Private Donations, Fund Raising Activities & Other Local Contributions										
Local In-Kind										
*Total Program Income		0.00	0.00	0.00						
*Total Local Cash					0.00	0.00	0.00			
*Total Local In-kind								0.00	0.00	0.00
										0.00

I certify that all items of match included in this budget have been reviewed and have determined these items appear to be allowable according to Federal and State laws and regulations. Also, providers of match are made aware of Federal and State laws and regulations regarding match and have certified that their match is allowable.

Signature

Date

*Must match fund sources on Summary Page.

Agency/County: _____
 Bluegrass Area Development District
 Title III FY24 Budget In-Kind Summary
 Date Submitted: _____

In-Kind Provider (Name)	Service	Item	Calculation of Fair Market Value	Fair Market Value
Supportive Services (III-B):				
Total III-B In-Kind Budgeted:				0.00
Congregate Meals (C1):				
Total C1 In-Kind Budgeted:				0.00
Home Delivered Meals (C2):				
Total C2 In-Kind Budgeted:				0.00
Total Title III In-Kind Budgeted				0.00
Please provide a description of the budgeted in-kind match provided and how it benefits this program.				