To: Kristie Rydeen, Susan Harran, and Glenda Oldenburg Addictive and Mental Disorders Division P.O. Box 202905 555 Fuller Helena, MT 59620-2905

From: Jodi Daly

106 West Broadway

Butte, MT 59701

February 11, 2013

Re: CSAA

Greetings:

I have enclosed the financial reports for the CSAA for the fiscal year starting July 1, 2013 as well as the closing of fiscal year 2012 with pay outs to the six active LAC's. I would like to request a \$10,000.00 draw on the funding, please send your check directly to Teresa Nichols, WMMHC, Building T-9 Fort Missoula, MT 59801.

If you have any questions please feel free to call me or Kathy Dunks at 497-9038.

Sincerely:

Jodi Daly, LCPC, CMHP WMMHC S.W. Regional Director

Jodi Daly

## <u>CSAA FINANCIAL REPORT FOR THE STATE OF MONTANA</u> <u>FEBRUARY 12, 2013</u>

# <u>DEPOSITS FROM THE STATE OF MONTANA final payment of fiscal year 2012 July \$5000.00 and first payment of fiscal year 2013 in November 2012 of \$10,000.00</u>

Of the \$5000.00 payment of fiscal year ending 2012 \$2546.00 was owed to WMMHC for paid vouchers for the CSAA in June 2012. The additional monies were given to the 6 LAC's currently meeting in the CSAA region. They each received \$409.00 apiece a total of \$2,454.00. This closes the 2012 fiscal year. The CSAA Board has requested a written accounting of the monies given to the LAC's for the fiscal yearend report for 2013.

All documentation of the fiscal year 2013 is attached.

## **DEPOSITS FROM WESTERN MT MENTLA HEALTH CENTER**

We keep a balance in the CSAA account of \$2500.00 per month to cover the meeting costs each month. As of February 11, 2013 WMMHC has deposited \$12,836.82 into the account to cover expenses. Of this amount \$2500.00 was from fiscal year 2012 to complete pay outs to LAC's; leaving a requested and received balance of \$10,336.82 for fiscal year 2013. Petty cash forms and bank reconciliations are required each month with copies of the CSAA expense vouchers to request a deposit into the account. Copies of the petty cash ledgers are included for your appraisal. CSAA has a checking account at US Bank that all monies are deposited and drawn from this account.

### **COPIES OF LEDGERS ATTACHED**

### **BREAKDOWN OF PAYMENTS:**

MILEAGE \$6,057.04

**MEALS \$1125.56** 

**LODGING \$1581.49** 

**DAYCARE \$120.00** 

**WEB SITE \$675.00** 

MISCELLANEOUS \$55.90 check printing fee to US Bank

Total Fiscal year 2013 spending as of February 11, 2013 \$9615.40

FISCAL YEAR END 2012 LOCAL ADVISORY COUNCILS PAY OUTS \$2454.00

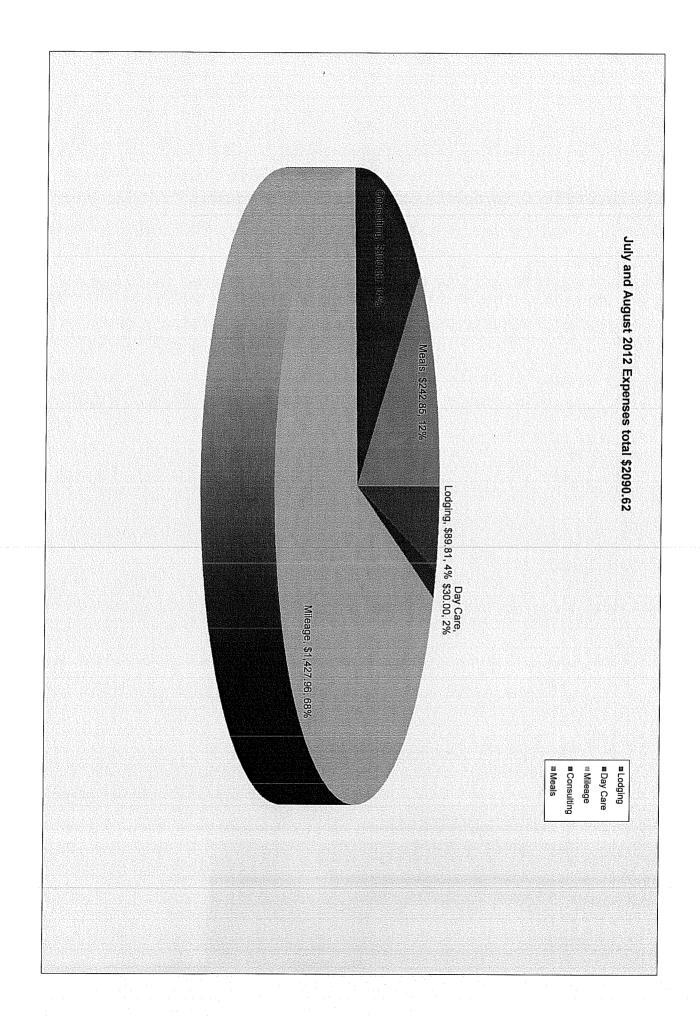
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Petty Cash Account:		CSAA		Date Mailed to A/P:	to A/P:			
Amount of Fund:	\$2	\$2,500.00		Dates of	From:		July 1,2012	
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DATE	NUMBER	WHOM RECEIVED	DESCRIPTION OF PURCHASE	CENTER	CODE	PAID	DEPOSITED	BALANCE
Beginning Balance	lance:							\$ 178.30
7/19/2012		WMMHC					\$2,321.70	\$ 2,500.00
7/27/2012	8805	5088 Lenore Stiffarm	mileage/meals			\$ 456.91		\$ 2,043.09
7/27/2012	6805	5089 Tom Peluso	cookies			\$ 10.75		\$ 2,032.34
7/27/2012	5090	5090 void				\$ -		\$ 2,032.34
7/27/2012	5091	5091 WMMHC	mileage			\$105.60		\$ 1,926.74
7/27/2012	5092	5092 Robin Johnson	mileage			\$99.00		\$ 1,827.74
7/27/2012	5093	5093 Jeanette Kotecki	mileage			\$ 77.00		\$ 1,750.74
7/27/2012	5094	5094 Tammy Kevwitch	mileage			\$ 33.00		\$ 1,717.74
7/27/2012	5095	5095 Alicia Smith	mileage			\$ 110.00		\$ 1,607.74
7/27/2012	5096	5096 Mavis Young Bear	mileage/meals			\$ 441.40		\$ 1,166.34
7/27/2012	5097	5097 Benny's Bistro	lunch			\$ 129.25		\$ 1,037.09
7/27/2012		5098 Betsy Garrignes	day care			\$ 30.00		\$ 1,007.09
7/27/2012	5099	5099 James Gustafson	mileage			\$ 103.40		\$ 903.69
7/27/2012	5100	5100 Sydney Blair	mileage			\$ 104.50		\$ 799.19
7/30/2012	5101	5101 ADL Cosnulting	computer			\$60.00		\$ 739.19
8/1/2012		5102 Wingate/Youngbear	lodging			\$89.81		\$ 649.38
8/17/2012		5103 ADL Consulting	monthly charge			\$100.00		\$ 549.38
8/17/2012		new checks						\$ 549.38
8/24/2012		WMMHC					\$ 1,850.62	\$ 2,400.00
9/19/2012	5104	5104 ADL Consulting	August/September			\$140.00		\$ 2,260.00
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TOTAL DISBURSED	\$ 2,090.62
TOTAL DEPOSITED/LOANS REPAID	\$ 4,172.32
ENDING BALANCE	\$ 2,260.00

BANK STATEMENT AND RECONCILIATION CASH COUNT RECONCILIATION

AMOUNT OF CASH ON HAND	11	\$2,500.00
BALANCE, DUE	Ş	240.00
CASHIER'S SIGNATURES		
Jodi Daly, LCPC, CMHP		
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\$ 2,363.78			BALANCE DUE			REPAID	TOTAL DEPOSITED/LOANS REPAID ENDING RAI ANCE
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\$ 593.12		\$ 96.23			lodging YoungBear	S111 VOID	
\$ 689.35		\$ 89.81			lodging Smith	5115 Wingate	9/28/2012 511
\$ 779.16		\$ 30.00			day care	12 betsy barrignes	
\$ 809.16		\$ 171.00			lunch	OLLL Benny'S BISTRO	
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CASHUER'S SIGNATURE

Jodi Daly LCPC, CNINP
DIRECWRANGES.W. Regional Director

BANK STATEMENT AND RECONCILIATION

CASH COUNT RECONCILIATION

**ENDING BALANCE** 

September 2012 Expenses total \$2123.78

■day care
■lodging

™ Mileage

meals
bank fees

		PE	PETTY CASH REIMBURSEMENT FORN	ENT FOR	≤			
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Beginning Balance 10/24/2012 10/26/2012 10/26/2012 10/26/2012	WMIMHC Deposit  5116 Tom Peluso 5117 Mavis Young Bear 5118 Cindy Smith	Beverages for meeting mileage-meals \$52.00 mileage	Beverages for meeting mileage-meals \$52.00 mileage		\$ 11.99 \$ 387.50 \$ 220.00
2	5119 WMMHC van travel mileage 5120 previously used check in last statement	mileage in last statement			
10/26/2012	5121 Betsy Garrignes	day care			
10/26/2012 10/26/2012	5122 Janette Kotecki 5173 Brett Linneweher	mileage			
10/26/2012	5124 Chili O'Brien's	food			
10/26/2012	5125 Center for Mental Health	alth mileage			
10/26/2012	5126 James Gustafson	mileage			
10/26/2012	5127 Louise Livingood	mileage			
10/26/2012	5128 Sally Miller	mileage			
	Smith 2/23/2012	300g			
	Young Bear 5/17/2012				
11/5/2012	5130 Wingate lodging September	per	Stiffarm,Smith,Young Bear		
11/5/2012	5131 Wingate October lodging		Young Bear and Smith		
11/5/2012	5132 ADL Consulting	website		L	
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TOTAL DEPOSITED/LOANS REPAID

\$ \$ \$

2,363.24 2,391.91

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TOTAL DISBURSED

**ENDING BALANCE** 

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CASH COUNT RECONCILIATION

BALANCE DUE \$ 2,391 CASHIER'S SIGNATURE:
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DIRECTOR'S SIGNATURE: 5, CIMINE
WMMHC S.W. Regional Director

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DATE	NUMBER	WHOM RECEIVED	DESCRIPTION OF PURCHASE	CENTER		PAID	DEPOSITED	BALANCE
Beginning Balance	ance:							\$ 108.09
11/16/2012		WMMHC					\$ 2,391.91	2
11/20/2012	513	5133 Southwest Chem Dep	Park county LAC			\$ 409.00		
		Attn: Jana Lehman						
11/20/2012	5134	4 Hill County Treasurer	Hill County LAC			\$ 409.00		
		Attn: Amber Spring						
11/26/2012	5135	5 Lewis and Clark LAC	Lewis and Clark LAC			\$ 409.00		
		ATTN: Eric Bryson						
11/26/2012	5136	6 Cascade County LAC	Cascade County LAC			\$ 409.00		
		ATTN: Linda Daggett				Ĭ.		
11/26/2012	5138	8 TiNellnkii Center	Blaine County LAC			\$ 409.00		
		ATTN: Blaine County LAC						
	5137							
11/26/2012	5139		Gallatin County LAC	VOID			\$ 409.00	
		NAMI Bozeman-LAC						
44 /20 /2042								\$ 864.00
11/30/2012	5140	5140 NAMI Bozeman	Gallatin County LAC			\$ 409.00		\$ 455.00
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BANK STATEMENT AND RECONCILIATION

CASH COUNT RECONCILIATION

**ENDING BALANCE** 

TOTAL DEPOSITED/LOANS REPAID

\$ \$ \$

2,454.00 2,800.91

455.00

CASHIER'S SIGNATURE:

AMOUNT OF CASH ON HAND

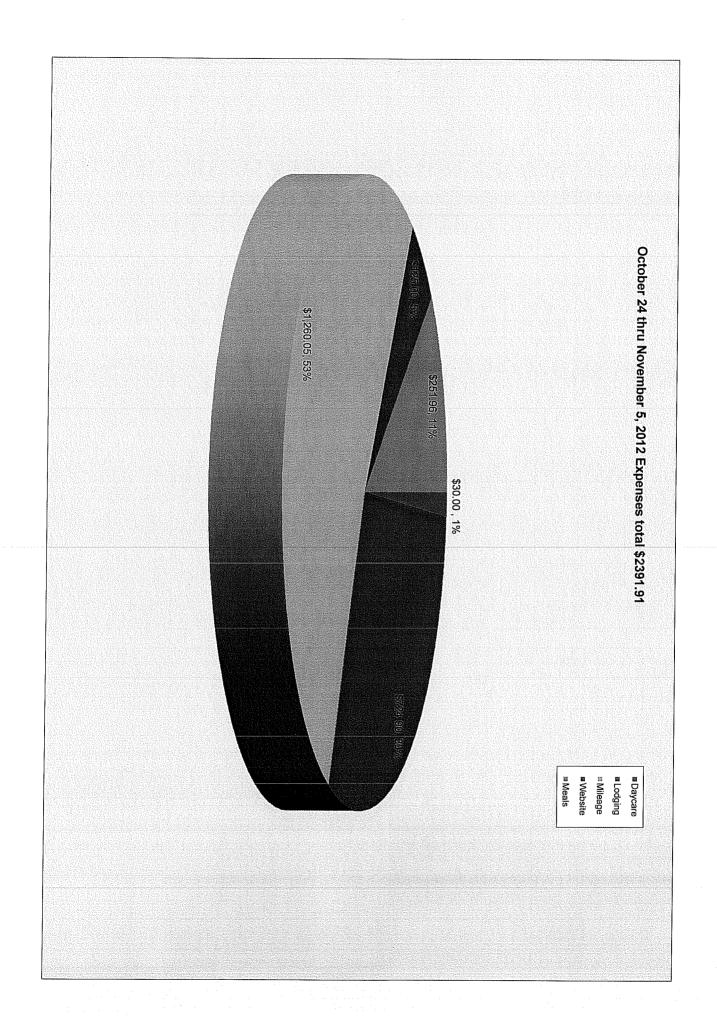
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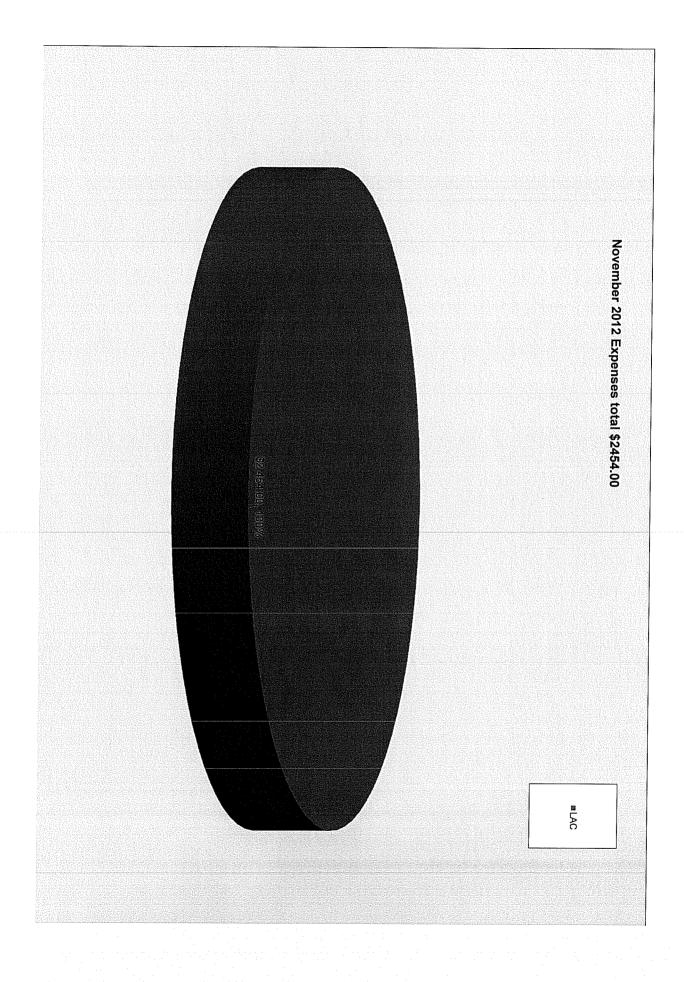
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DIRECTOR'S SIGNATURE CPC, CMHP
WMMHC S.W. Regional Director

TOTAL DISBURSED





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CSAA						mileage	NATINY DUNKS	TCTC	12/19/2012
Cash Account:   CSAA						mileage and meals	Lenore Stiffarm	5150	12/1/2012
Cash Account:   CSAA			\$ -				Void	5149	12/14/2012
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Cash Account:   CSAA						daycare	Betsy Garrignes	5144	12/14/2012
Cash Account:   CSAA						mileage	James Gustafson	5143	12/14/2012
Cash Account:   CSAA						mileage and snacks	Alicia Smith	5142	12/14/2012
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 $oxedsymbol{eta}$ BANK STATEMENT AND RECONCILIATION

CASH COUNT RECONCILIATION

**ENDING BALANCE** 

TOTAL DEPOSITED/LOANS REPAID

\$ \$

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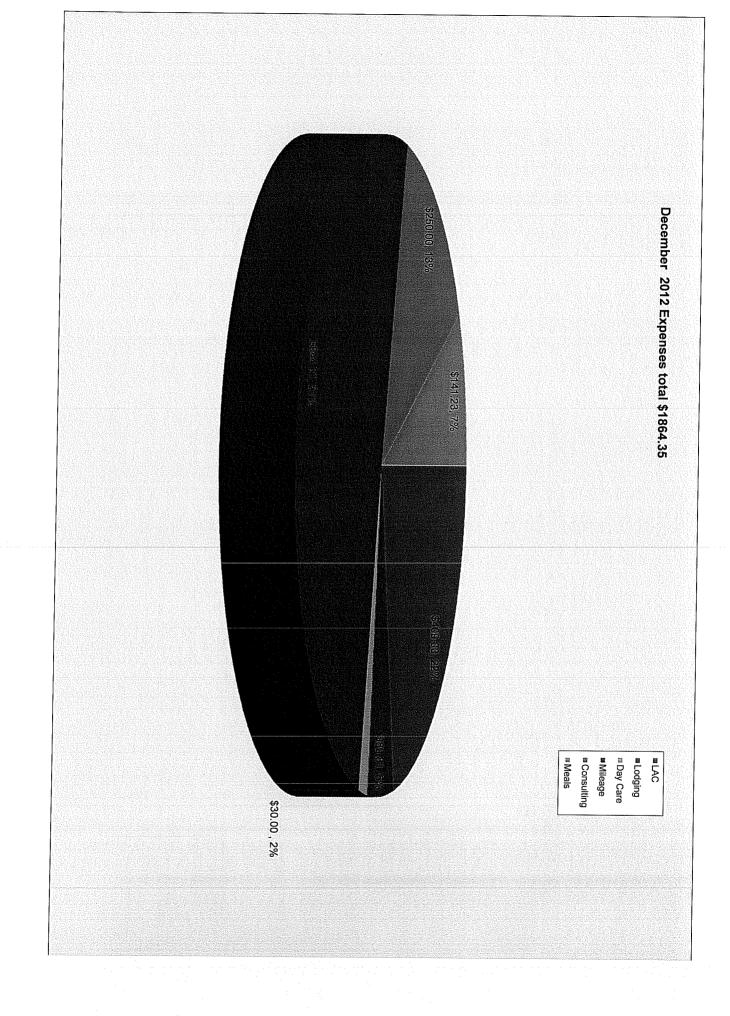
BALANCE DUE

CASHIER'S SIGNATURE:

DIRECTOR'S SIGNATURE:

DIRECTOR'S SIGNATURE:

Regional Director



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Cash Account:   CSAA     CSAA	Cash Account:         CSAA         Date Mailed to A/P:         1/25/2013           Cash Custodian:         Jodi Daly         Date Mailed to A/P:         To WHOM PAID OR FROM         Dates of Prom:         From:         1/25/2013           CHECK/VINIBER         TO WHOM PAID OR FROM NUMBER         DESCRIPTION OF PURCHASE         COST CENTER         ACCOUNT CODE         AMOUNT PAID         AMOUNT DEPOSITED           5/2013         5156         Void         DESCRIPTION OF PURCHASE         CENTER         CODE         PAID         DEPOSITED           5/2013         5156         Void         mileage         S 101.75         \$ 101.75         DEPOSITED           5/2013         5150         James Gustafson         mileage and coffee         S 319.20         \$ 319.20           5/2013         5160         James Gustafson         mileage         \$ 32.00         \$ 32.00           5/2013         5161         Cindy Smith         mileage         \$ 32.00         \$ 32.00						mileage	3 Brett Linneweber	
Cash Account:   CSAA	Cash Account:   CSAA     CSAA     Date Mailed to A/P:   To WHOM PAID OR FROM   DESCRIPTION OF PURCHASE   CENTER   CODE   FOOL   DESCRIPTION OF PURCHASE   CENTER   CODE   DESCRIPTION OF PURCHASE   CODE   DESCRIPTION OF	-					mileage		
Clash Account:   CSAA   CSAA     CSAA   CCOUNT   CSAA   CCOUNT   CAMOUNT   CODE   CSAA   CCOUNT   CODE   CSAAA   CODE   CSAAA   CCOUNT   CODE   CSAAA   CCOUNT   CODE   CSAAAA   CODE   CSAAAA   COOL   CSAAAA   COOL   CSAAAA   CCOUNT   CODE   CSAAAA   COOL   CSAAAAA   COOL   CSAAAAA   CCOUNT   CSAAAAA   COOL   CSAAAAA   CCOUNT   CSAAAAAAAA   CCOUNT   CSAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	Cash Account:   CSAA						mileage	1 Cindy Smith	
Cash Account:   CSAA   CSAA     CSAA     CSAA   CCOUNT   CODE	Cash Account:   CSAA						mileage	0 James Gustafson	
Cash Account:   CSAA   CSAA	(Please fill in shaded areas only. The spreadsheet will calculate for you.)           Cash Account:         CSAA         CSAA         Date Mailed to A/P:         1/25/2013           Int of Fund:         \$2,500.00         Date Mailed to A/P:         1/25/2013           CASH Custodian:         Jodi Daly         Dates of Prom:         From:         1/25/2013           CHECK/         TO WHOM PAID OR FROM NUMBER         COST COUNT CODE         ACCOUNT CODE         AMOUNT CODE           NUMBER         WHOM RECEIVED         DESCRIPTION OF PURCHASE         CENTER CODE         AMOUNT DEPOSITED           5/2013         5157         Center for Mental Health         mileage         \$ 101.75         \$ 101.75						mileage and coffee	9 Alicia Smith	
Cash Account:         CSAA         CSAA         Date Mailed to A/P:         COST         ACCOUNT         AMOUNT         AMOUNT         AMOUNT         Date Mailed to A/P:         Date M	(Please fill in shaded areas only. The spreadsheet will calculate for you.)           Cash Account:         CSAA         Date Mailed to A/P:         Date Mailed to A/P:         1/25/2013           Cash Custodian:         Jodi Daly         Dates of CHECK/         From: To:         To:         1/25/2013           CHECK/VOUCHER         TO WHOM PAID OR FROM NUMBER         COST ACCOUNT AMOUNT							8 Void	
Cash Account:         CSAA         CSAA         Date Mailed to A/P:         Date Mailed to A/P:         1/25/2013           Cash Account:         CSAA         Date Mailed to A/P:         Date Mailed to A/P:         1/25/2013           Cash Custodian:         Jodi Daly         Pates of Prom:         From:         To:         1/25/2013           CHECK/         Jodi Daly         COST         ACCOUNT         AMOUNT         AMOUNT           NUMBER         WHOM RECEIVED         DESCRIPTION OF PURCHASE         CENTER         CODE         PAID         DEPOSITED	Cash Account:  CSAA  CSAA  CSAA  CSAA  CSAA  CHECK/  VOUCHER  NUMBER  COMM RECEIVED  COST  NUMBER  COST  NUMBER  COST  NUMBER  CODE  CHECK/  NUMBER  COST  NUMBER  COST  NUMBER  CONTER  CODE  CENTER  CODE  CENTER  CODE  CENTER  CODE  COST  CODE  CONTO  CENTER  CODE  CONTO  CENTER  CODE  CONTO  CODE  CODE  CONTO  CODE  CODE  CONTO  CODE  CODE  CONTO  CODE  CO						mileage		
Cash Account:  Cash Custodian:  Cash Custodian:  CHECK/  VOUCHER  VOUCHER  VOUCHER  NUMBER  COST  VHOM RECEIVED  Date Mailed to A/P:  Cash Custodian:  Cash Custodian:  Cost  Cost  Cobe  PAID  DEPOSITED	(Please fill in shaded areas only. The spreadsheet will calculate for you.)  Int of Fund: \$2,500.00 Date Mailed to A/P: Date							6 Void	
(Please fill in shaded areas only. The spreadsheet will calculate for you.)           Cash Account:         CSAA         Date Mailed to A/P:         1/25/2013           Int of Fund:         \$2,500.00         Date Mailed to A/P:         1/25/2013           Cash Custodian:         Jodi Daly         Pains         From:         1/25/2013           CHECK/         CHECK/         TO WHOM PAID OR FROM         COST         ACCOUNT         AMOUNT         AMOUNT           NUMBER         WHOM RECEIVED         DESCRIPTION OF PURCHASE         CENTER         CODE         PAID         DEPOSITED	Cash Account:  CSAA  CSAA  CSAA  CSAA  CSAA  COST  NUMBER  COST  COST  COST  COST  COST  COST  COST  COST  COST  CODE  CODE  COST  CODE  COST  CODE  COST  CODE  COST  CODE  COST  CODE  CODE  COST  CODE  COST  CODE  COST  CODE  COST  CODE  CODE  COST  CODE  CODE  COST  CODE  C						0.00		Beginning Balance:
Cash Account:         CSAA         (Please fill in shaded areas only. The spreadsheet will calculate for you.)           Int of Fund:         \$2,500.00         Date Mailed to A/P:           Cash Custodian:         Jodi Daly         Peimb.           CHECK/         TO WHOM PAID OR FROM         COST         ACCOUNT         AMOUNT         <	(Please fill in shaded areas only. The spreadsheet will calculate for you.)           Cash Account:         CSAA         Date Mailed to A/P:         Date Mailed to A/P:           Int of Fund:         \$2,500.00         Dates of Prom:         From:           Cash Custodian:         Jodi Daly         Reimb.         To:           CHECK/         TO WHOM PAID OR FROM         COST         ACCOUNT         AMOUNT         AMOUNT	77	DEPOSITED	PAID	7111.4	CENTER	DESCRIPTION OF PURCHASE	WHOM RECEIVED	
(Please fill in shaded areas only. The spreadsheet will calculate for you.)  CSAA  CSAA  Date Mailed to A/P:  \$2,500.00  Dates of From:  Jodi Daly  Reimb.  To:	(Please fill in shaded areas only. The spreadsheet will calculate for you.)  CSAA  Date Mailed to A/P:  \$2,500.00  Dates of  From:  Jodi Daly  Reimb.  To:		AMOUNT	AMOUNT		COST		TO WHOM PAID OR FROM	
(Please fill in shaded areas only. The spreadsheet will calculate for you.)  CSAA Date Mailed to A/P:  \$2,500.00 Dates of From:	(Please fill in shaded areas only. The spreadsheet will calculate for you.)  CSAA  Date Mailed to A/P:  \$2,500.00  Dates of  From:				То:	Reimb.		Jodi Daly	Petty Cash Custodian:
(Please fill in shaded areas only. The spreadshee	(Please fill in shaded areas only. The spreadshee	013	1/25/2		From:	Dates of		\$2,500.00	Amount of Fund:
					ed to A/P:	Date Mail			etty Cash Account:
					te for you.)	et will calculat	fill in shaded areas only. The spreadshe		

FORMS ATTACHED - PLEASE PLACE AN "x" BY ONE OF THE FOLLOWING:

Jodi Daly, LCPC, CMHP
DIRECTOR SIGNATURE.
W. Regional Director

BANK STATEMENT AND RECONCILIATION

CASH COUNT RECONCILIATION

