

**STATE OF ILLINOIS
DHS - DRS
FINAL RECONCILIATION REPORT**

PROVIDER LEGAL NAME: Mid Valley Special Education Cooperative PROVIDER FEIN/EIN #: 364196796

DHS/DRS PROJECT OFFICER: Kathy Kaniewski CONTRACT #: 46CTD00146

TOTAL CONTRACT AMOUNT: \$78,720.00 Contract Category STEP Performance

BUDGET LINE ITEM	TOTAL (A) APPROVED BUDGET	ACTUAL (B) EXPENDITURE	AMOUNT (C) EARNED
PROGRAM EXPENSES			\$0.00
SUPPORT EXPENSES			\$0.00
OCCUPANCY EXPENSES			\$0.00
ADMIN & OFFICE EXPENSES			\$0.00
OTHER (Fixed Rate Contracts)			\$0.00
STEP BASE AMOUNT	\$23,616.00	\$23,616.00	\$23,616.00
STEP PERFORMANCE	\$55,104.00 (A)	\$15,744.00 (B)	\$15,744.00 (C)
CONTRACT TOTAL	\$78,720.00	\$39,360.00	\$39,360.00

(D) MATCH EXPENDITURE TOTAL 76502

(E) Total amount payable by DHS/DRS this contract period (C) \$39,360.00

(F) Enter total payments received from DHS/DRS this contract period \$27,552.00

(G) Subtotal of lines E minus F \$11,808.00

(H) If G is a positive amount, that is the amount OWED TO THE PROVIDER \$11,808.00

(I) If G is a negative amount, that is the amount OWED TO DHS \$0.00

(J) Contract amount to be CANCELLED (A minus C only if a positive number) \$39,360.00

Provider: _____ Date 6/22/2015
Signature of Authorized Agent

Name of Authorized Agent

I HAVE REVIEWED THE ABOVE INFORMATION AND CERTIFY ITS ACCURACY.

DHS/DRS Project Officer: _____ Date
Signature of Project Officer

ALL FINAL RECONCILIATIONS DUE NO LATER THAN JULY 6TH