

**FY08 Agency Semi-Annual Financial Report
 Developmental Disabilities Resource Board
 Individual Unit Cost**

Agency: _____
 Program: _____
 Submitted by: _____
 Period Covered: **Jul-Dec** **Jan-Jun**

	Annual Program Budget			Current Period			Year-To-Date		
	AFF	Revised	DDRB	Actual	% of Budget	DDRB	Actual	% of Budget	DDRB
A. Total Expenses									
B. # of Individuals									
C. # of Units (only for POS)									
Total Cost/Individual									
Total Cost/ Unit (only for POS)									

Total Cost/Individual = A divided by B
 Total Cost/Unit = A divided by C

One Unit of Service = _____
 (only for POS)