

SAMPLE County

Annual Report of Expenditures SFY2025 & Annual Incentive Plan SFY2026

PART 1 – ANNUAL REPORT OF EXPENDITURES SFY2025

TOTAL INCENTIVE FUNDS DISBURSED

Incentive Funds Advanced for SFY2025 (<i>October 2024 – June 2025</i>):	\$200,000.00
<i>No Incentive Settlement Disbursed during SFY2025:</i>	0.00
Total Amount of Incentives Disbursed:	\$200,000.00

INFORMATION FROM COUNTY INCENTIVE PLAN ESTIMATE FOR SFY2025

Total Incentive Funds Estimate from SFY2025 Annual Incentive Plan:	\$250,000.00
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PERFORMANCE MEASURE COMPARISON SFY2024 vs SFY2025

SFY 2024 Paternity Establishment: 100.87%	SFY 2024 Cases Under Order: 90.26%
SFY 2025 Paternity Establishment: 101.22%	SFY 2025 Cases Under Order: 92.14%
Difference: 0.35%	Difference: 1.88%
SFY 2024 Current Support Collected: 74.69%	SFY 2024 Cases with Arrears Payment: 73.99%
SFY 2025 Current Support Collected: 72.82%	SFY 2025 Cases with Arrears Payment: 71.83%
Difference: -1.87%	Difference: -2.16%
SFY 2024 Total Collections: \$14,721,919.74	
SFY 2025 Total Collections: \$15,185,669.11	
Difference: \$463,749.37	

EXPENDITURES & SAVINGS – PLEASE COMPLETE THIS SECTION

1. **(Required)** Of the **Total Amount of Incentives Disbursed** how much did the County:

SPENT:	182,000.00
SAVED:	18,000.00
<i>This amount MUST total:</i>	\$200,000.00

Do not include any incentive expenditures that were paid from prior year incentive funds. Only indicate how much of the SFY2025 Funds were Spent/Saved.

2. **(Optional)** If there were any changes to your SFY2025 Annual Incentive Plan, please indicate below:
(1) the changes made; and (2) the impact on performance measures.

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PART 2 – ANNUAL INCENTIVE PLAN SFY2026

PLEASE COMPLETE THE FOLLOWING SECTION

1. **(Required)** Of the **Total Amount of Incentives Disbursed** how much did the County:

IV-D Service Area <i>Check All that Apply</i>	☒ Budgeted IV-D Expenses ☐ Contract (Legal, Sheriff, etc.) ☐ Other – <i>if this option is checked a description must be included in number 2 below.</i>
ESTIMATED INCENTIVES EXPENDITURES SFY2026	\$0.00
EXPECTED PERFORMANCE AREA(S) IMPACT <i>Check All that Apply</i>	☒ Increase All Performance Measures ☐ Increase Total Collections ☐ Increase Paternity Establishment % ☐ Increase Cases Under Order % ☐ Increase Current Support Paid % ☐ Increase Payment to Arrears %

2. **(Optional)** Use this space to provide additional information regarding the SFY2026 Incentive Plan.

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3. **(Required)** Please have your authorized county representative (as determined by the County) complete the information below. Typed/Digital signatures are accepted.

Date: 09/03/2025 Email: your.name@yourcounty.gov Authorized County Representative Signature: <i>Representative Signature</i> IV-D Structure: ☐ County Manager ☒ DSS ☐ Private
