

## 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
<b>Total Amount of Incentives Disbursed:</b>	<b>\$200,000.00</b>

##### 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 2025 Paternity Establishment: 101.22%  
Difference: 0.35%

SFY 2024 Cases Under Order: 90.26%  
SFY 2025 Cases Under Order: 92.14%  
Difference: 1.88%

SFY 2024 Current Support Collected: 74.69%  
SFY 2025 Current Support Collected: 72.82%  
Difference: -1.87%

SFY 2024 Cases with Arrears Payment: 73.99%  
SFY 2025 Cases with Arrears Payment: 71.83%  
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:

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

**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:

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

<b>Date:</b> 09/03/2025 <b>Email:</b> your.name@yourcounty.gov <b>Authorized County Representative Signature:</b> <i>Representative Signature</i>  <b>IV-D Structure:</b> <input type="checkbox"/> County Manager <input checked="" type="checkbox"/> DSS <input type="checkbox"/> Private
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