September 23, 2019

To: Supervisor Janice Hahn, Chair
    Supervisor Hilda L. Solis
    Supervisor Mark Ridley-Thomas
    Supervisor Sheila Huehl
    Supervisor Kathryn Barger

From: Bobby D. Cagle
    Director

NIÑOS LATINOS UNIDOS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

REVIEW OF REPORT

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of the Niños Latinos Unidos Foster Family Agency (the FFA) in March 2019. The FFA has three offices: one located in the Fourth Supervisorial District; one in the Fifth Supervisorial District; and one in Riverside County. All offices provide services to the County of Los Angeles DCFS placed children, Probation foster youth, children placed by other counties, and Non-Minor Dependents (NMDs).

Key Outcomes

![Priority Findings Table]

CAD conducted an on-site Contract Compliance Assessment review of the Contractor's compliance within the following applicable areas: General Contract Requirements; Resource Family Home Requirements; Facility and Environment; Engagement and Teamwork; Needs and Services Plans; Permanency; Education and Independent Living Program Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Files.
The FFA was in full compliance with 4 of 11 applicable areas of CAD's Contract Compliance Review: General Contract Requirements; Resource Family Home Requirements; Permanency; and Personal Rights and Social/Emotional Well-Being.

For the purpose of this review, 12 DCFS placed children were selected for the sample. CAD reviewed the 12 children's files to assess the level of care and services they received. CAD interviewed nine children, as three were pre-verbal. Additionally, five discharged children's files were reviewed to assess the FFA's compliance with permanency efforts.

CAD reviewed four Resource Family Home (RFH) files and five staff files for compliance with Title 22 Regulations and County contract requirements. CAD also conducted interviews with staff and the Resource Family Parents (RFPs). Site visits were conducted to the FFA and the RFH to assess the quality of care and supervision provided to the placed children.

CAD noted deficiencies in the areas of: Facility and Environment, related to vehicle registration not being inside the vehicle, expired insurance in the vehicle, yard and outdoor activity space not being free from safety hazards, empty fire extinguisher, expired license displayed in the RFH, and the foster youth bill of rights not being posted in the RFH; Engagement and Teamwork, related to the Needs and Services Plans (NSP); goals did not identify the children's Child and Family Team (CFT); NSP, related to the NSP not being completed accurately and on time; Education and Independent Living Program Services, related to the FFA not documenting collaborative efforts with the educational rights holder to enroll the children in appropriate classes and provide support services, the FFA not documenting its efforts to maintain children in their school of origin, and the FFA not documenting its efforts to provide children with Youth Development Services, Independent Living Program Services, or vocational training programs; Health and Medical Needs, related to required follow-up dental examinations not being conducted on time; Personal Needs/Survival & Economic Well-Being, related to children not being provided with transportation services and children not being encouraged and supported by the RFP in keeping a life book; and Personnel Files, related to personnel not receiving criminal clearances prior to hire dates, personnel not receiving Tuberculosis clearances within one year prior to hire date and personnel not receiving annual on-going training.

On May 1, 2019, DCFS CAD Children Services Administrator Is held an exit conference with the FFA Administrator and Supervisors.

The FFA representatives agreed with the review findings and recommendations. They were receptive to implementing systemic changes to improve the FFA's compliance with regulatory standards.

The FFA provided the attached approved Corrective Action Plan addressing the noted deficiencies in this compliance report.
If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager, at (213) 351-5530.

BDC:KR
LTI:nw

Attachments

c: Sachi A. Hamai, Chief Executive Officer
Arlene Barrera, Acting Auditor-Controller
Terri L. McDonald, Chief Probation Officer
Sheila Mitchell, Chief Deputy Probation Officer, Juvenile Services
Public Information Office
Audit Committee
Sybil Brand Commission
Fahir Milian, Chief Executive Officer, Niños Latinos Unidos FFA
Kellee Coleman, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division
June 5, 2019

DCFS Contracts Administration Division
Contract Compliance Section
Vanessa Stamp, CA II
3530 Wilshire Blvd., 4th Floor
Los Angeles, CA 90010

Re: Contract Compliance Review

Dear Ms. Stamp:

Niños Latinos Unidos, Inc. (NLU) will address the findings set forth in the most recent Contract Monitoring Review conducted by DCFS Contract Compliance Section as follows:

III. Facility & Environment.

13 – Vehicles used to transport children were well maintained and in good repair.

    Findings:
    • Current Registration was not found in the Resource Foster Parent (RFP) car.
    • Proof of Insurance found in the RFP car was expired.

    Corrective Action Plan:
    • NLU has modified its “Spot Check and Caregiver Contact Note” to include a monthly verification of proof of current Auto Registration and Car Insurance. (See attachment #1)
    • RFPs have placed the Vehicle Registration and current Proof of Insurance in the glove compartment of their respective cars (See pictures in attachment # 2).

14 - The exterior and the grounds of the RFH were safe and well maintained.
    • Yard and outdoor activity space are free from safety hazards

    Findings:
    • RFP’s backyard has the son’s dog; RFP stated the dog is big and jumps on her. RFP’s stated being afraid of the dog and not allowing children to play in the backyard.
    • RFP’s backyard has planks of wood.
Corrective Action Plan:
- On 05/22/2019, the Palmdale Office Administrator went to see the backyard of the home and found that the dog is friendly and playful. The Administrator noted that the family had built a gate on the side corridor of the house where the dog can be placed while the children are in the backyard (See pictures in attachment #3).
- On 05/22/2019, The Palmdale Office Administrator verified that planks of wood have been removed from the backyard. Some of that material was used to build the gate on the side corridor.

15 - Common quarters were safe and well maintained.
- A current and operable all-purpose fire extinguisher is readily accessible

Findings:
- Downstairs Fire Extinguisher was empty.

Corrective Action Plan:
- On May 21, 2019, RFP purchased and replaced the downstairs Fire Extinguisher (See picture in attachment # 4).

16 - RFH has posted and visible in the home all required notices.
- Certificate of Approval

Findings:
- The License in the home is expired.

Corrective Action Plan:
- NLU has modified its “Spot Check and Caregiver Contact Note” to include a monthly verification that all pertinent notices and current certificate of approval are current and posted in the home (See attachment #5).
- NLU office has provided the RFP with a current Certificate of Approval and it has been posted in the RFH (See picture in attachment # 6).

17 - Children's bedrooms were safe and well maintained.
- Adequate bedroom space is provided.
- Adequate passage exists between beds and room entrance.

Findings:
- The room is very crowded when all three children are present in the room.
- The room barely has space to walk when all three children are present in the room

Corrective Action Plan:
- RFP replaced the full size bunk bed with a single size bunk bed to allow more space in the bedroom. (See pictures in attachment # 7).
IV. Engagement & Teamwork

22 - The NSP goals identified the children’s CFT team decision-making process for each goal.

   Findings:
   • The drug use, coping skills and cutting were not addressed in NSP but stated in CFT goals.

   Corrective Action Plan:
   • NLU is to provide to its clinical staff training on Core Practice Model, which includes a review of Engaging, Teaming, Assessment, Planning & Intervention, Track & Adapt, and collaboration with the Child and Family Team (CFT) in the development of goals.
   • Training is to be completed by June 21, 2019.

V. Needs and Services Plans (NSP).

23 - The NSPs were completed accurately and on time.
   • Are comprehensive and accurate
   • Included Case Plans and Concurrent Case Plan Goals
   • Signed by developmentally able children
   • Signed by RFPs (and Parents if applicable)
   • Signed by FFA staff
   • Signed by CSW/DPO

   Findings:
   • Some NSP were not comprehensive in the inclusion of goals
   • No Concurrent Case Plan identified in some NSP
   • Some children did not sign the NSP
   • Some Resource Parents did not sign NSP, or did not sign in a timely manner.
   • Some FFA Social Workers did not sign NSP, or did not sign in a timely manner.
   • Some CSWs did not sign NSP, or did not sign in a timely manner, or insufficient attempts to obtain signature on the NSP.

   Corrective Action Plan:
   • NLU has requested Jennifer Bateman, CSA I from Department of Children and Family Services, Out-of-Home Care Management Division a training on Needs and Services Plan for NLU’s Foster Care Social Workers, Supervisors and Administrators. This training will be completed no later than June 27, 2019
   • NLU administrators and supervisors will review all initial and updated NSP/Quarterly reports to ensure that they are comprehensive and timely.
   • NLU Administrators and Supervisors will work closely with the FCSWs to ensure that all participants in the development of the NSP and its goals sign in a timely manner.
• NLU Administrators and Supervisors will ensure that FCSWs have made the required 3 attempts for obtain CSW signature on the NSP within the required 5-day timeframe.

VII. Education & Independent Living Program Services.

37 - The FFA documented collaborative efforts with the educational rights holder to enroll the children in appropriate classes and provide educational support services.

Findings:
• FFA Social Worker did not follow up on providing tutoring services for the child.
• FFA Social Worker did not address truancy services for a child.

Corrective Action Plan:
• Administrators and supervisors will ensure during supervision meetings with the FCSWs that the needs of the child/youth are addressed and followed up in a consistent manner with intended goals.
• FCSW will encourage children and youth to utilize the Kahn Academy website by visiting https://www.khanacademy.org to enhance their learning process.

38 - The FFA documented its efforts to maintain children in their school of origin after placement.

Findings:
• There is no documentation for the reason of children not being in their school of origin.

Corrective Action Plan:
• CSW approved children to be enrolled in school nearby the foster home due to distance to school of origin. Approval was not properly documented in file.
• NLU Administrator and/or supervisor will ensure that FFA SWs document in the child’s contact note the reason for a child not being enrolled in the school of origin.

39. The FFA documented its efforts to provide eligible children with Youth Development Services (YDS)/Independent Living Program Services (ILP)/or vocational training programs, or documented barriers to acquiring services.

Findings:
• There is no documentation for one child receiving ILP services, neither documentation if ILP services were being pursued for the child.

Corrective Action Plan:
• NLU Administrator and/or Supervisor will follow up during supervision meetings with the FCSWs that the youth is provided with the pertinent information about the ILP Coordinator.
• FCSW will obtain the ILP Coordinator’s information from https://www.ilponline.org and will provide this information to the youth.
• FCSW will encourage and assist youth to establish contact with their respective ILP coordinator.
• FCSW will follow up with youth and NMD on their progress on ILP services. Such progress will be documented in case record.

VIII. Health & Medical Needs.

43. Required follow-up dental examinations were conducted on time.

Findings:
• There is no documentation of the reason for a late dental exam.

Corrective Action Plan:
• NLU Administrator explained that late dental follow up was due to the dentist office not having an appointment available on or before the due date.
• NLU Administrator and/or supervisor will ensure that FFA SWs document in the child’s contact note a valid reason for a child receiving late dental appointment.

X. PERSONAL NEEDS/SURVIVAL & ECONOMIC WELL-BEING.

61. Children are provided with transportation.

Findings:
• RFP stated FFA did not assist to transport children to the family visits.
• RFP stated FFA SW did not come to the home on the weeks the RFP would pick up their check from the office.

Corrective Action Plan:
• NLU Administrators will provide training to FCSWs regarding collaborative efforts with the RFPs when providing transportation services to children placed in NLU. This training will be completed no later than June 28, 2019.
• NLU will provide training to FCSWs on DCFS Statement of Work section 17.1 and 17.2 regarding visitation requirements and timeframes. This training will be completed no later than June 28, 2019.

62. The FFA ensures that children are encouraged and supported by the RFPs in keeping a life-book.

Findings:
• A child was discharged from foster care but RFP did not give life book and picture to the child during discharge.

Corrective Action Plan:
• On 05/30/2019 NLU FCSW hand delivered child’s life book and pictures to DCFS CSW. (See attachment # 8)
• NLU Administrator and/or Supervisor will provide training to RFPs and FCSWs on the procedure discharge of a child, youth and Non Minor Dependents. This training will be completed no later than June 28, 2019.

64. Children are provided with YDS or ILP services

Findings:
• A child is of age, but not receiving YDS or ILP services.

Corrective Action Plan:
• NLU Administrator and/or Supervisor will follow up during supervision meetings with the FCSWs that youth, 14 years and older, is being provided with the pertinent information on ILP Coordinator, the YDS Team and services offered by the Independent Living Program (ILP) and Youth Development Services (YDS).
• FCSW will encourage and assist youth and NMD to visit The Independent Living Program webpage by visiting https://www.ilponline.org and or the Youth Development Services by visiting http://dects.lacounty.gov/aboutus/Youth-Development-Services.
• FCSW will follow up with youth on their progress on the ILP services and will support youth in completing ILP services.

XI. PERSONNEL FILES

74. Personnel completed criminal related requirements prior to working with children.

Findings:
• One FCSW was hired on 8/12/16 but their DOJ, FBI, and CACI did not clear until 08/19/2016

Corrective Action Plan:
• The FCSW was hired on 08/12/2016 but did not begin working until 08/22/2016, after the clearance process was completed.
• Payroll indicates 08/22/2016 as the starting date of work for FCSW (See attachment # 9)

75. Personnel received all required medical clearances.

Findings:
• One FCSW was hired on 8/12/16 but received TB clearance on 05/26/15 and 09/01/16

Corrective Action Plan:
• The Administrators will ensure that newly hired employee will not start to work until they have received and/or presented all required medical clearances.
• Office Administrators will submit to NLU Headquarters proof that all required clearances have been received before any newly hired employee starts their employment.

79. Personnel are receiving annual on-going trainings (including CSEC, Child Abuse Recertification, Lesbian Gay Bisexual Transgender Questioning, etc.).

Findings:
• One FCSW had no training in the file for 2018.
• One FCSW had two hours of training in 2018.

Corrective Action Plan:
• NLU has established a mandatory annual syllabus training that includes, but is not limited to training on Child Abuse Mandated Reporter, CSEC, Cultural Sensitivity, LGBTQ, etc.
• NLU Administrators will verify that FCSWs are completing required continued education on at least a quarterly basis.
• A corrective action plan will be implemented with the FCSW towards the completions of continued education training. A written warning may be placed in employee’s file if is not in compliance with the corrective action plan.

If you shall have any further questions regarding the contents of this response, please contact me at your earliest convenience.

Respectfully,

[Signature]

Pedro Travieso, MSW, MBA
Director of Programs and Operations
Niños Latinos Unidos, Inc.
Spot Check & Caregiver Contact Note

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<tr>
<td>10. RFH/CFH has emergency sheet and disaster plan.</td>
<td>□ YES □ NO</td>
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<td>11. Family vehicle(s) have seatbelt capacity for all family members.</td>
<td>□ YES □ NO</td>
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<td>\hspace{1cm} There is proof of current Car Insurance &amp; Registration in the car.</td>
<td>□ YES □ NO</td>
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<tr>
<td>12. For age appropriate children, there is a car seat and/or booster.</td>
<td>□ YES □ NO</td>
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<tr>
<td>13. Each RP/CP is current with 8 hours minimum of continued education.</td>
<td>□ YES □ NO</td>
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<td>14. RFH/CFH has working utilities</td>
<td>□ YES □ NO</td>
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<td>15. All adults residing in the RFH/CFH have fingerprint clearances.</td>
<td>□ YES □ NO</td>
</tr>
<tr>
<td>16. RFH/CFH meets CCL and Agency standards.</td>
<td>□ YES □ NO</td>
</tr>
<tr>
<td>17. Pool or other body of water properly fenced.</td>
<td>□ YES □ N/A</td>
</tr>
<tr>
<td>18. Each child/youth is being assisted with the development of the Life Book</td>
<td>□ YES □ N/A</td>
</tr>
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**For Supervisor Use Only:**
Are there any issues or concerns that must be addressed at the supervisory or administrative level? □ YES □ NO

If Yes, please include brief explanation & plan of correction (Please list any repairs noted at the time of home inspection including monthly inside/outside walk through & indicate the plan of correction):

---

**Contact Note (Pertaining to the Certified/Resource Family):**
Click here to enter text.

---

**FCSW:** __________________________
**SFCSW:** __________________________
**RP/CP:** __________________________

*Whenever a deadline is required to correct a deficiency.*
Niños Latinos Unidos, Inc.
Spot Check & Caregiver Contact Note

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<td>Date(s) of Unannounced Home Visit(s):</td>
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<td>1. Toxic substances are stored &amp; locked appropriately</td>
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<td>2. RFH/CFH is safe from any hazards.</td>
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<tr>
<td>3. RFH/CFH is clean, sanitary, and in good repair (including children's rooms)</td>
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<tr>
<td>4. Child has towels for personal use &amp; access to linens to change bedding</td>
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<tr>
<td>5. RFH has posted and visible in the home all required notices and certificate.</td>
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<td>6. Fire extinguisher, smoke &amp; carbon monoxide detectors are functioning.</td>
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<td>7. First Aid kit is maintained (including manual)</td>
</tr>
<tr>
<td>8. RFH/CFH has adequate supply of perishable &amp; non perishable foods.</td>
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<tr>
<td>9. RFH/CFH has knives under lock and key</td>
</tr>
<tr>
<td>10. RFH/CFH has age appropriate educational materials available to minor</td>
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**For Supervisor Use Only:**
Are there any issues or concerns that must be addressed at the supervisory or administrative level? □ YES □ NO

If Yes, please include brief explanation & plan of correction (Please list any repairs noted at the time of home inspection including monthly inside/outside walk through & indicate the plan of correction):

**Contact Note (Pertaining to the Certified/Resource Family):**

FCSW: ___________________________  Date: ___________________________

SFCSW: ___________________________  Date: ___________________________

*RP/CP: ___________________________  Date: ___________________________

*Whenever a deadline is required to correct a deficiency.
5/30/2019

On 5/30/2019 I Yuri Segura, FCSW delivered a Lifebook and 11 pictures RP Margarita Torres gave me for Child Valentina Especto DOB: 11/05/2015.

The Lifebook and the pictures are to be delivered to CSW Louis Lopez, 323-965-7055 or his authorized representative.

I, Louis Lopez, acknowledge having received the Lifebook and 11 pictures from Yuri Segura, FCSW.

Yuri Segura, FCSW
NIÑOS LATINOS UNIDOS, FOSTER FAMILY AGENCY

NAME / NOMBRE: Nuria Cardenas

PAY PERIODS ARE: 5th AND 20th / PERIODOS DE PAGO SON CADA 5th & 20th DE CADA MES

START DATE / FECHA: 01/16/16

END DATE / FECHA: 01/31/16

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TOTAL = 40

Have you had an injury or illness on the job in the last pay period that has not been reported to the office? Yes ( ) No (X) ¿Ha usted sufrido una lesión o enfermedad en el trabajo en el último periodo de pago, que usted no haya reportado a la oficina? Sí ( ) No ( )

Employee’s Signature / Firma del Empleado: [Signature]

Supervisor’s Signature / Firma del Supervisor: [Signature]
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<td>D12 HOS125</td>
<td>50.77</td>
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| Check Totals: | 2,188.03 | 1,468.00 | 30,917.35 | |
|---------------| 222.78 | 3,452.14 | |