**Equal Remuneration Order**

**Summary of Financial Information**

Service providers should complete all fields for each service agreement. The income from service agreement and salaries and related costs for 2019-20 can be estimated.

|  |  |
| --- | --- |
| **Service provider name** |  |
| **Service agreement** *[insert details – service agreement reference number and title]* |
| **Government agency**  |  |
| **Initial award date**  |  |
| **Initial end date of the contract (number of years, including extension options)** |  |
| **Number of contract extensions** |  |
| **Current expiry date** |  |
| **Type of Service (Homelessness, OOHC, FDV)**  |  |
| **Did the contract receive Component I Funding 2011/2012, 15%** | **Yes/ No**  | **Did the contract receive Component II Funding 2013, 10%** | **Yes / No**  |
| **Has the contract received contract variations that have increased funding beyond WA Govt CPI or changes to the service deliverables?** |  |
| **Has your organisation renegotiated this contract when it has been extended, varied and what was the outcome.****Do you believe the negotiation was in line with the Delivering Community Services in Partnership Policy?** |  |
| **Direct staffing[[1]](#footnote-1)(FTE and Levels)** |   |
| **Financial years** | **2017-18** | **2018-19** | **2019-20** |
| **Income** * Service agreement
 |  |  |  |
| * Any other income
 |  |  |  |
| **Total Income**  |  |  |  |
| **Expenditure** * Salaries and related costs
 |  |  |  |
| * Operational and administration costs

e.g. Bookkeeping, InsuranceManagement oversight,Telephone and IT, ReportingRent, Building Maintenance Office Overheads, Travel  |   |  |  |
| **Total Expenditure**  |  |  |  |
| **Cash Surplus / Deficit ()** |  |  |  |
| **Hours of operation** |  |  |  |
| **Location (Metro or Regional)** |  |
| **Additional comments (Quality / Risk / Other)**  |
|  |

1. 100% Service delivery staffing [↑](#footnote-ref-1)