



CHILDREN'S
SERVICES
FUND
OF JACKSON COUNTY

Investing in Children. Strengthening Community.

CSF FLUXX PARTNER PORTAL

TECHNICAL GUIDE



A step-by-step resource
to help CSF partners
navigate the Fluxx
Partner Portal.

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CSF Fluxx Partner Portal Technical Guide

Introduction

Welcome to the Children's Services Fund (CSF) Partner Portal. This guide is designed to help partners navigate and use the CSF Fluxx Portal effectively. The portal is used to keep organizational and user information up to date, submit applications, budget amendments, reimbursement requests, and access reports.

Accessing the Portal

Portal URL: <https://jacokids.fluxx.io>

The CSF Fluxx Partner Portal is optimized for **Google Chrome**.

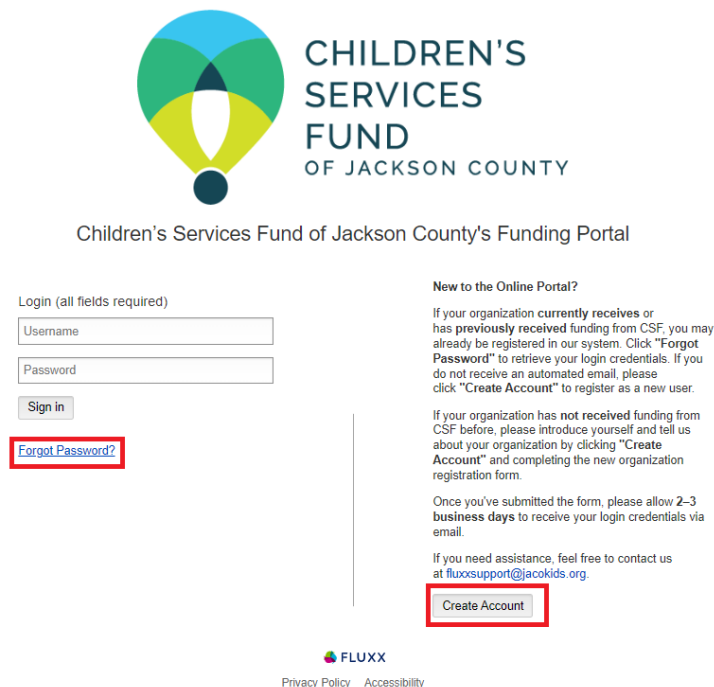
While other modern browsers may be compatible, some portal features may not display or operate as intended.

Account Setup & User Management

Logging In/First-Time Access

If your organization currently receives or has previously received funding from CSF, you may already have an account in our system:

1. Click **Forgot Password** to retrieve your login credentials.
2. Follow the instructions in the automated email to reset your password.
3. If you do not receive the email, click **Create Account** to register as a new user within your funded or previously funded organization.



The screenshot shows the login page for the Children's Services Fund of Jackson County's Funding Portal. At the top is the logo, which consists of a stylized figure with arms raised, formed by overlapping blue, green, and yellow shapes, next to the text "CHILDREN'S SERVICES FUND OF JACKSON COUNTY". Below the logo is the text "Children's Services Fund of Jackson County's Funding Portal".

On the left side, there is a "Login (all fields required)" section with two input fields: "Username" and "Password". Below these fields is a "Sign in" button. A red box highlights the "Forgot Password?" link below the "Sign in" button.

On the right side, there is a "New to the Online Portal?" section. It contains two paragraphs of text. The first paragraph states: "If your organization currently receives or has previously received funding from CSF, you may already be registered in our system. Click 'Forgot Password' to retrieve your login credentials. If you do not receive an automated email, please click 'Create Account' to register as a new user." The second paragraph states: "If your organization has not received funding from CSF before, please introduce yourself and tell us about your organization by clicking 'Create Account' and completing the new organization registration form." Below this text is a "Create Account" button, which is also highlighted with a red box. At the bottom of the right section, there is a link to "fluxsupport@jacokids.org" and a note about receiving login credentials via email.

At the bottom of the page, there is a "FLUXX" logo and links for "Privacy Policy" and "Accessibility".

New Organization Registration

If your organization has not received funding from CSF before, please:

1. Click **Create Account**.
2. Complete the new organization registration form with information about your organization.
3. After submitting, allow **2–3 business days** to receive your login credentials via email.
4. **Need Help?**
Contact CSF support at fluxsupport@jacokids.org if you have any issues with logging in or account creation.

User Roles & Permissions

Access and permissions in the CSF Fluxx Portal are determined by the role assigned to each user within your organization. **Role changes can only be made by CSF staff.**

Role	Access Level
Project Contact	Full access to create and manage applications/contracts, submit and view reports, submit budget amendments, and submit reimbursements.
Moderator	All access that a Project Contact has, plus the ability to update organization information, upload organizational documents, add users to the organization, and view or update the organization's banking information. Banking information is only accessible to designated Moderators and is not visible to other organization users. Multiple Moderators may be designated; however, a current Moderator must contact fluxxsupport@jacokids.org to add an additional Moderator or remove an existing user.
Project Signatory	Authorized to review, approve, and submit applications, sign contracts, and submit budget amendments on behalf of the organization.
Partner User	Limited access to view applications, reports, and notifications; cannot create, edit, or submit applications, amendments, or reimbursements.

Updating User Profile Information

1. From the left-hand navigation menu, click **People > Users**.

The screenshot displays the FLUXX application interface. On the left is a navigation menu for 'CHILDREN'S SERVICES FUND OF JACKSON COUNTY'. The 'PEOPLE (4)' section is expanded, and 'Users (4)' is highlighted with a red box. The main content area shows a list of users: 'Celeste Testing', 'Jovanna Testing', 'Mojj Testing', and 'Test One'. The 'Celeste Testing' user profile is selected and shown in detail on the right. The profile header includes the name 'Celeste Testing' and the email 'celesteortiz0921@gmail.com'. Below this is a 'Contact Information' section with fields for Prefix, First Name (Celeste), Last Name (Testing), Suffix, Preferred Pronouns, Primary Organization (Test Record for CSF), and Position / Title. Further down are fields for Email (celesteortiz0921@gmail.com), Preferred Phone Number, Extension Number, and Active User (Yes). At the bottom of the profile section is a link for 'Alternate Address (if different than Organization)'. In the top right corner of the profile view, there is a red 'Edit' button. At the bottom right of the entire interface is a 'Create New' button.

2. A list of users connected to your organization will appear. **Select the user profile you wish to edit.**
 - Click the **"Edit"** button In the top-right corner of the page.
 - After making updates, click **Save and Close**

Note: Only Moderators will see the Create New button and will have access to view all users associated with the organization profile.

Adding New Users (Moderators Only)

1. From the left-hand navigation menu, click **People > Users**.
2. In the bottom right-hand corner, click **Create New**.
3. Enter the new user's required information (name, email, role, etc.).
4. When finished, click **Save** to complete the process.
5. Advise the new user to navigate to the **CSF Partner Portal** via the following link <https://jacokids.fluxx.io>, and click **Forgot Password** to finish their account creation.

The screenshot displays the CSF Fluxx Partner Portal interface. On the left, a dark navigation menu lists various sections: Organizations (1), PEOPLE (4), Users (4) (highlighted with a red box), APPLICATIONS (1), Draft, Invited for Full Application, Revisions Required, Submitted (1), Declined, CONTRACTS (2), Active (2), Closed, PARTNER REPORTS, Academic Reports, Calendar Reports, Capacity Building Reports, Overdue, other Reports, Revisions Required, Submitted, REIMBURSEMENTS (1), Open for Reimbursement (1), Submitted, Additional Information Required, Paid, and BANK ACCOUNTS. The main content area shows a list of users: Celeste Testing, Jovanna Testing, Moji Testing, and Test One. Each user entry includes their name, organization (Test Record for CSF), email, and phone number. On the right, a detailed view for 'Celeste Testing' is shown, including contact information and a form for creating a new user. The 'Create New' button is highlighted with a red box in the bottom right corner.

CHILDREN'S SERVICES FUND OF JACKSON COUNTY

Test Record for CSF

Organizations (1)

PEOPLE (4)

Users (4)

APPLICATIONS (1)

Draft

Invited for Full Application

Revisions Required

Submitted (1)

Declined

CONTRACTS (2)

Active (2)

Closed

PARTNER REPORTS

Academic Reports

Calendar Reports

Capacity Building Reports

Overdue

other Reports

Revisions Required

Submitted

REIMBURSEMENTS (1)

Open for Reimbursement (1)

Submitted

Additional Information Required

Paid

BANK ACCOUNTS

FLUXX

Search...

Celeste Testing

Org: Test Record for CSF

Email

Phone:

Jovanna Testing

Org: Test Record for CSF

Email: test@jacokids.org

Phone:

Moji Testing

Org: Test Record for CSF

Email:

Phone:

Test One

Active

Org: Test Record for CSF

Email:

Phone:

1 - 4 of 4

Create New

Celeste Testing

Test Record for CSF

▼ Contact Information

Prefix:

First Name: Celeste

Last Name: Testing

Suffix:

Preferred Pronouns:

Primary Organization: Test Record for CSF

Position / Title:

Email:

Preferred Phone Number:

Extension Number:

Active User: Yes

► Alternate Address (if different than Organization)

Updating Organization Information (Moderators Only)

1. Click **Organization** in the left-hand navigation menu.
2. Review your organization's information for accuracy. Update any missing or incorrect details.

Note All items on this page must be completed. Incomplete information may prevent future applications from being accepted.

3. To make updates, click **Edit** in the upper right-hand corner of the page.
 4. Once finished, click **Update** to save your changes.
 5. If you do not see the **Edit** button in the upper right-hand corner, you are **not** designated as the **Partner Moderator** and will not be able to update this information.
- If you are unsure who your organization's Partner Moderator is, please contact fluxxsupport@jacokids.org.

CHILDREN'S SERVICES FUND OF JACKSON COUNTY

Search...

Test Record for CSF

Location: Kansas City, Missouri 64108
Phone: 8166543847

Test Record for CSF
EIN: 82-2446441

Kansas City, Missouri
Jovanna Testing

Organizations (1)

PEOPLE (4)
Users (4)

APPLICATIONS (1)
Draft
Invited for Full Application
Revisions Required
Submitted (1)
Declined

CONTRACTS (2)
Active (2)
Closed

PARTNER REPORTS
Academic Reports
Calendar Reports
Capacity Building Reports
Overdue
Other Reports
Revisions Required
Submitted

REIMBURSEMENTS (1)
Open for Reimbursement (1)
Submitted
Additional Information Required
Paid

BANK ACCOUNTS

FLUXX

1 - 1 of 1

Table of Contents
Organization Information
Organization Details
Key Contacts
Certificate of Insurance
Documents
Demographics via Candid

Organization Information

Organization Legal Name:	Test Record for CSF
Organization Name (d/b/a):	Test Record for CSF
EIN:	82-2446441
Street Address 1:	2345 Grand Blvd, Ste 1450
Street Address 2:	
City:	Kansas City
County:	
State:	Missouri
Country:	United States
ZIP Code:	64108
Phone:	8166543847
E-mail:	celeste@jacokids.org
Website:	

Update

Adding Banking Information into Fluxx (Moderators Access Only)

Instructions for adding your banking information in Fluxx

- Log in to Fluxx at <https://jacokids.fluxx.io>
 - From the left-hand navigation menu, locate **Bank Accounts**.
1. **Select the banking information record.**
Click the applicable record listed under **Requested**.
 2. **Click Edit.**
Select **Edit** in the upper-right corner of the page to begin entering or updating the banking information.
 3. **Complete all required fields.**
Carefully enter the requested account details, bank information, contact information, and any special instructions.
 4. **Review the information.**
Confirm that the account name, account number, routing number, bank address, and supporting documents are accurate.
 5. **Submit the banking information.**
 - Click **Save and Close** if you plan to return later and continue working.
 - Click **Submit** once all information is complete and ready for CSF review.

The screenshot displays the FLUXX portal interface. On the left, a sidebar menu lists various report categories. The 'BANK ACCOUNTS (1)' section is expanded, showing 'Requested (1)' and 'Submitted Details'. The main content area is titled 'Test Record for CSF' and contains several sections: 'Table of Contents' (with links to Account Details, Bank Information, Special Instructions, Contact Person Information, and Documents), 'Account Details' (with fields for Name on the Account, Account Number, and ABA Routing Number), 'Bank Information' (with fields for Bank Name, Bank Code, Street Address (line 1), Street Address (line 2), City, and Postal Code), and 'Special Instructions'. An 'Edit' button is located in the top right corner, and a 'Submit' button is in the bottom right corner.

6. Confirm submission.

After submitting, refresh the page and confirm that the record has moved from Requested to Submitted Details under Bank Accounts.

7. Updating Banking Information - If your organization needs to update its banking information for any reason after submission, please contact CSF for assistance.

Banking Information Guidelines

- Only users assigned the Moderator role can view and edit banking information in Fluxx. Other users within the organization will not have access to this section.
- Banking information that is saved but not submitted will not be reviewed by CSF.
- Review all banking information carefully before submitting. Incorrect or incomplete information may delay reimbursement payments.

Financial Management

Submitting Reimbursement Request Invoice

1. In the left-hand navigation menu, under Reimbursements, click *Open for Reimbursement*.
2. Select the reimbursement record for which you are requesting payment.
3. Click Edit in the top right-hand corner of the screen
4. After clicking Edit, scroll to **Reimbursement Request**.
5. Enter the date of submission
6. If you are submitting reimbursement for an actual expense, skip to **Submitting an Actual Expense Reimbursement (Pg. 12)**.

The screenshot displays the CSF Fluxx Partner Portal interface. On the left, a navigation menu lists various report categories, with 'REIMBURSEMENTS (4)' highlighted and 'Open for Reimbursement (4)' selected. The main content area shows a list of reimbursement records for 'Test Record for CSF' under 'Actual Expense Testing'. Each record includes details like 'Core Funding - Calendar (core)', a unique identifier (e.g., CF-2026-42422), and a due date (e.g., July 31, 2026). The status for all records is 'Open for Reimbursement'. An 'Edit' button is visible in the top right corner of the record list. Below the list, a 'Table of Contents' section is visible, followed by an 'Overview' section detailing the project information, including the partner name, submission due date, project title, type, length, and value. The 'Reimbursement Request' section at the bottom allows for selecting the reimbursement year (Year 1) and month (August), with a total request amount of \$1,550.00. A 'Submit' button is located at the bottom right of the form.

CHILDREN'S SERVICES FUND OF JACKSON COUNTY

Search...

Search

Test Record for CSF
Actual Expense Testing
Core Funding - Calendar (core)
● CF-2026-42422 / 22060069
Amount Due:
Due Date: July 31, 2026
Status: Open for Reimbursement

Test Record for CSF
Actual Expense Testing
Core Funding - Calendar (core)
● CF-2026-42422 / 22060064
Amount Due:
Due Date: July 24, 2026
Status: Open for Reimbursement

Test Record for CSF
Units of Service Test
Core Funding - Calendar (core)
● CF-2026-40984 / 22068717
Amount Due:
Due Date: July 29, 2026
Status: Open for Reimbursement

Test Record for CSF
Units of Service Test
Core Funding - Calendar (core)
● CF-2026-40984 / 22068718
Amount Due:
Due Date: July 10, 2026
Status: Open for Reimbursement

Payment 2 of 2
Due at: July 29, 2026

Open Processing Reimbursement Paid

▼ Table of Contents
Overview
Reimbursement Request
Documents & Invoices

▼ Overview
Partner: Test Record for CSF
Submission Due Date: July 29, 2026
Project Title: Units of Service Test
Project Type: Core Funding - Calendar (core)
Length of Project: 24 months
Project Dates: -
Project Value: Year 1: \$100,000.00
Year 2: \$100,000.00
Total: \$200,000.00

▼ Reimbursement Request
Reimbursement Year: Year 1
Month: August
Total Reimbursement Request: \$1,550.00

FLUXX

1 - 4 of 4

Edit

Submit

Submitting a Unit Cost Reimbursement

1. Under Unit Costs Click "+ Add Reimbursement Item"

Year 1 Award Amount: \$100,000.00
Remaining for Year 1 (after reimbursement): \$98,450.00

Date of Submission

Please Note: The submission date MUST reflect the actual day you submit your reimbursement request. If you began the request on an earlier date but did not complete the submission, you must update the submission date to the current date before finalizing.

Unit Costs

Behavior Intervention (1hr) - test | \$1,000.00 (\$100.00 / 10.0)

Edit Reimbursement Request: \$1,000.00
Approved Budget: \$1,000.00
Total Requested to Date: \$2,200.00
Remaining: -\$1,200.00

Case Coordination (1hr) - test | \$2,750.00 (\$550.00 / 5.0)

Edit Reimbursement Request: \$550.00
Approved Budget: \$2,750.00
Total Requested to Date: \$550.00
Remaining: \$2,200.00

Crisis Intervention (1hr) - test | \$45,000.00 (\$150.00 / 300.0) **+ Add Reimbursement Item**

Approved Budget: \$45,000.00
Total Requested to Date:
Remaining: \$45,000.00

Community Outreach (1hr) - test | \$51,250.00 (\$266.25 / 200.0) **+ Add Reimbursement Item**

Approved Budget: \$51,250.00
Total Requested to Date:
Remaining: \$51,250.00

Reimbursement Request Total	\$1,550.00
Approved Unit Cost Total (4 Items)	\$100,000.00
Requested to Date Total	\$2,750.00
Remaining	\$97,250.00

Year 1 Award Amount: \$100,000.00
Remaining for Year 1 (after reimbursement): \$98,450.00

Cancel Save **Save and Close**

- In the pop-up form, enter the Number of (Units) you are requesting for that month – click Save.
- Continue editing and entering amounts for each line until all eligible expenses are entered. If no expenses were incurred, enter Zero.
- Click **Save+Close** once complete and then click on submit.

+ Add Reimbursement Item

Unit Cost Type: Crisis Intervention (1hr)
Unit Cost: \$150.00

Number of Units

Reimbursement Request Amount: \$0.00

Organization Name: Test Record for CSF

Related Budget Item:

Cost Description:

Budget Justification: test

Reimbursement Month: ["August"]

Save

Submitting an Actual Expense Reimbursement

Scroll down to the **Reimbursement Request** heading.

- Under the appropriate **budget category** (e.g., *Consultants, Professional Development, Supplies*).
- Click **+ Add Reimbursement Item** next to the line item you are billing against. A pop-up box will appear labeled **Add Reimbursement Item**.

1. Enter Expense Details

- In the pop-up form:
- Enter the total amount you are requesting for that month.
- Click **Save** when finished.

2. Continue editing and entering amounts for each line item until all eligible expenses are entered. If no expenses were incurred, enter Zero.

3. Confirm Totals

- Review the **Reimbursement Request Total** at the bottom of the page.

4. Add Date of Submission

- Enter the **actual date** you are submitting the request in the **Date of Submission** field.

5. Submit for Review

- Once all items are entered, click **Submit** to send your reimbursement to CSF for review.

The screenshot shows the 'Reimbursement Request' form in the CSF Fluxx Partner Portal. At the top, project details are listed: Length of Project (24 months), Project Dates (July 1, 2028 - June 30, 2028), and Project Value (Year 1: \$100,000.00, Year 2: \$100,000.00, Total: \$200,000.00). The main section is titled 'Reimbursement Request' and contains fields for 'Reimbursement Year' (Year 1), 'Month' (April), and 'Total Reimbursement Request' (\$0.00). Below these are 'Year 1 Award Amount' (\$100,000.00) and 'Remaining for Year 1 (after reimbursement)' (\$100,000.00). A red box highlights the 'Date of Submission' field. A pop-up dialog titled '+ Add Reimbursement Item' is open, showing fields for 'Organization Name' (Test Record for CSF), 'Related Budget Item' (Salary), 'Cost Description' (Clinical Psychologist), 'Budget Justification' (Clinical Psychologist Salary Request), 'Reimbursement Month' (April), and 'Amount Requested'. A red box highlights the 'Amount Requested' field. The dialog has a 'Save' button. Below the dialog, the 'Salary Costs' section shows two line items: 'Clinical Psychologist Clinical Psychologist Salary. Requesting 10% based on time allocated to this program | CSFJC Cost: \$12,500.00' and 'Program Coordinator Allocation of program coordinator salary based on the time allocated, 10% based on the time spent on the program | CSFJC Cost: \$12,000.00'. Each line item has an 'Approved Budget', 'Total Requested to Date', and 'Remaining' amount. A red box highlights the '+ Add Reimbursement Item' button next to the first line item. At the bottom of the form, there is a 'Reimbursement Request Total' section showing 'Approved Salary Costs - CSFJC Total (2)' and 'Requested to Date Total' (\$24,500.00). A red box highlights the 'Cancel', 'Save', and 'Save and Close' buttons at the bottom right.

- The request will then move to **Submitted to CSF** status in the Reimbursement dashboard.

Reimbursement Guidelines

- All reimbursement invoices must be submitted through the FLUXX portal and are **due on the 15th of each month** following the reporting month.
- The submission date must reflect the day you finalize the request.
- Access to reimbursement invoices will become available to partners in FLUXX on the first day of each month.
- All partners must submit for reimbursement monthly.
- If no reimbursable expenses are incurred during the reporting month, **an invoice with a zero-dollar amount MUST be submitted.**
- Partners have up to 120 days from the service date to submit missed reimbursement expenditures. Expenses submitted after the 120-day deadline are not reimbursable.
- Ensure that you are saving frequently while entering items for reimbursement.

Budget Amendments

Policies & Deadlines

Contracts Reimbursed Based on Actual Expenses

- Projects reimbursed based on actual expenses are allowed **one (1)** budget amendment per contract year. The timing of the amendment is determined by the partner; however, requests must be submitted **no later than 60 days prior to the end of the contract year**.
- Requests submitted after this deadline will **NOT** be accepted.

Contracts Reimbursed Based on Units of Service

- Projects reimbursed based on Units of Service will have **three (3)** opportunities to adjust the proposed number of approved units. The timing of the amendment is determined by the partner; however, requests must be submitted **no later than 60 days prior to the end of the contract year**.
- Requests submitted after this deadline will **NOT** be accepted.

Amendment Request Process

1. The partner must submit a written request to their assigned CSF Program Officer outlining the proposed budget changes and providing clear justification for the requested amendment.
2. Once the Program Officer receives the request, the CSF Finance Team will open the Budget Amendment form in FLUXX, enabling the partner to complete and submit the amendment for review.
3. After the partner submits the Budget Amendment form, the CSF Team will review the request.
 - If additional information or revisions are needed, the amendment will be returned to the partner through FLUXX with comments and instructions.
 - If the amendment is approved, the partner will be notified, and the approved adjustments will be made to the budget in FLUXX.
 - If the amendment is not approved, the partner will be notified of the decision.

Completing a Unit Cost Budget Amendment in Fluxx

1. Log in to Fluxx and navigate to Revisions and Amendments from the left-hand menu.
2. Click on Open Amendments.

CHILDREN'S SERVICES FUND OF JACKSON COUNTY

Test Record for CSF

CSFJC Test Tech App

Grant ID: G-2026-41662 / 30453238

Type: Formal Amendment (Year 1)

Received on: July 20, 2026

Test Record for CSF

UNITS OF SERVICE TEST 7/20

CF-2025-40964 / 30453242

Type: Year 2 Budget Revision

Received on: July 20, 2026

Test Record for CSF

UNITS OF SERVICE TEST 7/20

CF-2025-40964 / 30453238

Type: Formal Amendment (Year 1)

Received on: July 20, 2026

Table of Contents

Information for Completion

Project Summary

Amendment Information

FLUXX

1 - 3 of 3

Edit

Submit

3. Select the contract you are amending and click **Edit** in the upper right-hand corner.
4. Scroll to the bottom of the page. Under **Budget Change**, click the green plus sign (+) to begin entering your revisions.

Amendment Information

Original Budget

Unit Type	Unit Rate	# of Units	Total
Behavior Intervention (1hr)	\$100.00	10.0	\$1,000.00
Case Coordination (1hr)	\$55.00	50.0	\$2,750.00
Crisis Intervention (1hr)	\$150.00	300.0	\$45,000.00
Community Outreach (1hr)	\$256.25	200.0	\$51,250.00
TOTAL			\$100,000.00

Direct Expenses	CSFJC Cost	Total Project
Salary Costs		
test	\$100,000.00	\$100,000.00
	\$100,000.00	\$100,000.00
Fringe Costs		
Other Direct Costs		
Equipment / Supplies		
TOTAL DIRECT EXPENSES	\$100,000.00	\$100,000.00
Indirect Expenses		
Indirect Project Costs		
TOTAL INDIRECT EXPENSES		

Please indicate the details of each proposed change to your budget that you wish to make by clicking on the + below.

The difference between the approved budget and the revised budget should equal ZERO.

The change request MUST equal 0 or the amendment will not be accepted.

Budget Change

+

5. From the dropdown menu in the screenshot, select **Unit Cost** from the **Cost Type** dropdown list – if your organization is reimbursed based on actual expenses *skip to 'Completing an Actual Expense Budget' Amendment in Fluxx*.

6. For each unit you are revising, complete the fields as follows:

- **Cost Type:** Select *Unit Costs*
- **Cost Description:** Enter the title of the unit/or approved expense line you are revising
- **Approved Budget:** Enter the total approved dollar amount for this unit/expense line.
- **New Revised Unit Cost:** Enter the **currently** approved unit rate.
- **New Revised Proposed Units:** Enter the new number of units you are proposing

Repeat Step 6 for each unit that requires revision.

7. Review and Submit

Before submitting:

- Confirm all affected budget lines are included.
- Verify the Approved Budget matches the Original Budget total.
- Ensure the total budget change equals zero.

Click **Save and Close** if you plan to return later to finish the amendment.

Once the amendment is complete, click **Submit**. Refresh the page and confirm that the amendment has moved to the **Submitted** section. Amendments that remain in draft status will not be reviewed by CSFJC.

Important: You may only revise the **number of proposed units**. The **unit rate cannot be changed**.

The screenshot shows a web form titled "Add a Budget Change" with a close button (X) in the top right corner. The form contains the following fields: "Cost Type" (a dropdown menu), "Cost Description" (a text area), "Approved Budget" (a text input), "New Revised Budget" (a text input), "Change Requested:" (a text input showing "\$0.00"), and "Reason for Amendment Request" (a text area). A "Save" button is located at the bottom right of the form. The form is overlaid on a background that appears to be a table with multiple rows.

Completing an Actual Expense Budget Amendment in Fluxx

Use the following steps to complete the budget amendment for an actual expense budget.

1. Open the Budget Amendment

- Log in to Fluxx and navigate to **Revisions and Amendments** from the left-hand navigation menu.
- Click on **Open Amendments**.
- Select the contract you are amending and click **Edit** in the upper right-hand corner.
- Review the **Original Budget** section before making changes. The Original Budget displays the approved budget lines for both **CSFJC Cost** and **Total Project Cost**.

REVISIONS AND AMENDMENTS (6) ▼
Open Amendments
Returned for Revision
Submitted
Approved (6)
Rejected

Original Budget		
Direct Expenses	CSFJC Cost	Total Project
Salary Costs		
Program Coordinator \$71,400.00 / 1.0	\$71,400.00	\$71,400.00
Clinical Social Worker \$24,250.00 / 1.0	\$24,250.00	\$24,250.00
Clinical Psychologist / 1.0	\$48,500.00	\$48,500.00
	\$95,680.00	\$144,150.00
Fringe Costs		
Other Direct Costs		
Contracting Services	\$48,729.00	\$48,729.00
Group Therapy	\$4,000.00	\$4,000.00
Mileage	\$1,800.00	\$1,800.00
	\$54,529.00	\$54,529.00
Equipment / Supplies		
Curriculum/ Workbooks		
Classroom Materials & Supplies		
Classroom Furniture (Therapeutic)		
Professional Liability Insurance	\$1,200.00	\$1,200.00
	\$1,200.00	\$1,200.00
TOTAL DIRECT EXPENSES	\$151,379.00	\$199,879.00
Indirect Expenses		
Indirect Project Costs		
Indirect Costs	\$22,121.00	
TOTAL INDIRECT EXPENSES	\$22,121.00	

2. Add Each Proposed Budget Change

- Under **Budget Change**, click the green + icon to add a proposed change to the CSFJC-approved amounts.
- A separate Budget Change entry must be completed for **each budget line that is being increased or decreased**.

Please indicate the details of each proposed change to your budget that you wish to make by clicking on the + below.

The difference between the approved budget and the revised budget should equal ZERO.

Budget Change +			
	Approved Budget:	Revised Budget:	Change Requested:
Equipment / Supplies:			
Curriculum Workbooks	\$5,000.00		-\$5,000.00
<i>Reason for Amendment:</i> To fund the Contract Social Worker Position			
	Approved Budget:	Revised Budget:	Change Requested:
Equipment / Supplies:			
Classroom Materials and Supplies	\$4,500.00		-\$4,500.00
<i>Reason for Amendment:</i> To fund the Contract Social Worker Position			
	Approved Budget:	Revised Budget:	Change Requested:
Equipment / Supplies:			
Classroom Furniture (Therapeutic)	\$5,000.00		-\$5,000.00
<i>Reason for Amendment:</i> To fund the Contract Social Worker Position			

3. Complete the Budget Change Form

Enter the following information:

Cost Type

Select the appropriate budget category, such as:

- Equipment/Supplies

Cost Description

Enter the name of the specific budget item being changed. The description should clearly identify the expense, such as:

- Curriculum Workbooks

CSFJC Approved Budget

Enter the CSFJC amount currently approved for that budget line.

New Revised Budget

Enter the **revised total amount** to be approved for this budget line after the amendment.

Change Requested

Fluxx will automatically calculate the difference between the Approved Budget and the New Revised Budget.

Reason for Amendment Request

Provide a clear explanation of why the change is needed and how the funds will be used.

Example: Funds are being moved from unused equipment/supply expenses to support the Contract Social Worker position.

Click **Save** when the entry is complete.

The screenshot shows a web form titled "Edit Budget Change" with a close button (X) in the top right corner. The form contains the following fields and values:

- Cost Type:** A dropdown menu with "Equipment / Supplies" selected.
- Cost Description:** A text area containing "Curriculum Workbooks".
- Approved Budget:** A text field containing "\$5,000".
- New Revised Budget:** A text field containing "\$0".
- Change Requested:** A label followed by the calculated value "\$-5,000.00".
- Reason for Amendment Request:** A text area containing "To fund the Contract Social Worker Position".
- Save:** A blue button at the bottom right of the form.

4. Budget Change Detail

The sum of the total budget requested changes should equal zero

5. Review and Submit

Before submitting:

- Confirm all affected budget lines are included.
- Verify the Approved Budget matches the Original Budget total.
- Ensure the total budget change equals zero.

Click **Save and Close** if you plan to return later to finish the amendment.

Once the amendment is complete, click **Submit**.

Refresh the page and confirm that the

amendment has moved to the **Submitted**

section. Amendments that remain in draft status will not be reviewed by CSFJC.

Budget Change Request				
Cost	Approved Budget	Revised Budget	Change Requested	Reason
Other Direct Expense: \$10,000 was used for partner support for Developmental-Behavioral Health Division to be a partner.	\$40,000.00	\$30,000.00	-\$10,000.00	cannot bill this line item as a flat cost. We must change the salary for the partner support to the grant as a salary line item.
Salary Costs: The salary for the Developmental-Behavioral Health Division effort is added to the previous salaries of the Culture and Language Coach and Coordinator / Program Evaluator.		\$7,874.24	\$7,874.24	We cannot bill the partner flat rate, we must bill the salary for the Developmental Behavioral Health Division time as salary / fringe. Because of this, we are amending this line item to include the salary for the specific partner. This partner is Clinical Psychologist. The \$7,874.24 will go to a salary line-item for The salary line-items for Culture and Language Coach and Coordinator / Program Evaluator will not change.
Fringe Benefits: The fringe for the Developmental-Behavioral Health Division effort is added to the previous fringe of the Culture and Language Coach and Coordinator / Program Evaluator.	\$26,722.00	\$28,847.76	\$2,125.76	We cannot bill the partner flat rate, we must bill the salary for the Developmental Behavioral Health Division time as salary / fringe. Because of this, we are amending this line item to include the additional fringe necessary for the specific partner. This partner is Clinical Psychologist. The \$2,125.76 will go to fringe for The fringe for Culture and Language Coach and Coordinator / Program Evaluator will not change.
TOTAL	\$66,722.00	\$66,722.00		

Budget Amendment Guidelines

- Budget amendments must include justification for all requested changes
- Budget amendments may only reallocate funds between previously approved budget line items.
- Budget amendments may not increase the organization's total CSF award amount
- Budget amendments must maintain a net-zero change to the total approved budget.
- Budget amendments are not effective until approved by CSF.

Reporting

Core Funding Reporting

For CSF's Core Funding contracts, academic and calendar year, the cadence for reporting is **twice per contract year**. The reports' due dates are as follows:

<i>Contract'Start'Date</i>	<i>π'Month'Report</i>	<i>12'Month'Report</i>
July 1 - Academic	January 15 th	July 15 th
January 1 - Calendar	July 15 th	January 15 th

Report Components

The 6-month report includes both demographic and narrative components.

<i>Demographic'Components</i>	<i>Narrative'Components</i>
Number of children served	Assessment of performance and accomplishments
Number of families served	Barriers or challenges encountered
Gender of children served	Alterations to program or project approach and implementation
Race and ethnicity of children served	Staffing changes
Number of children served by postal code	Progress toward outcomes

The 12-month report also includes both demographic and narrative components.

Demographic components include a report of the additional number of children and families served since the 6-month report in the same categories listed in the table above.

Narrative components of the 12-month report are the same as the 6-month report, with the inclusion of a question focused on 'lessons learned' during the contract year.

Completing the Core Funding Reports in Fluxx

1. **Log in** to the Partner Portal at Children's Services Fund of Jackson County | Sign in.
2. From the left-hand navigation menu, go to **Partner Reports**.
3. Select **Calendar Reports** / or **Academic Reports** depending on the report you are completing.
4. In the upper right-hand corner, click **Edit**.
5. Complete the narrative component of the report.

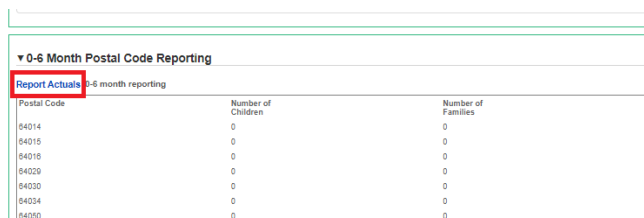
The screenshot displays the Fluxx Partner Portal interface. On the left is a navigation menu with categories like INFORMATION, ORGANIZATIONS, PEOPLE, APPLICATIONS, CONTRACTS, PARTNER REPORTS, and REIMBURSEMENTS. Under PARTNER REPORTS, 'Calendar Reports (1)' is highlighted. The main content area shows a report for 'Clear Tomorrow Kc Inc' with a status of 'Open for Reporting'. A progress bar at the top indicates the current stage: 'Awaiting Submission of 6 Month Report'. Below this is a 'Table of Contents' section listing 'Narrative Report', 'Demographics - 0-6 Month Reporting', '0-6 Month Postal Code Reporting', and 'Documents'. The 'Narrative Report' section is expanded, showing five sub-sections: 'Assessment of Performance / Accomplishments', 'Barriers or Challenges Encountered', 'Alterations to Program or Project Approach and Implementation', 'Staffing Changes', and 'Lessons Learned'. Each sub-section has a text area for input. In the top right corner, an 'Edit' button is highlighted with a red box. In the bottom right corner, a 'Submit' button is also highlighted with a red box. The bottom of the page shows a pagination bar with '1 - 1 of 1'.

Demographics Reporting

- The total number of children and families reported in the Demographics section must match the totals reported in the Postal Code Reporting section.

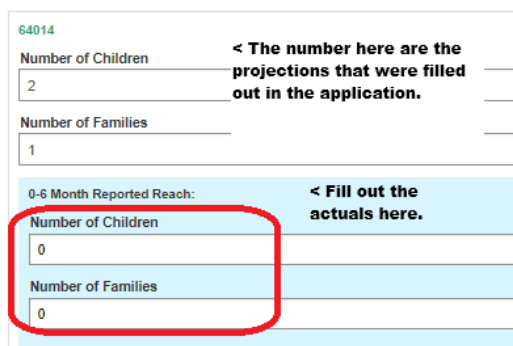
Postal Code Reporting

1. Click Report Actuals



Postal Code	Number of Children	Number of Families
64014	0	0
64015	0	0
64016	0	0
64020	0	0
64030	0	0
64034	0	0
64050	0	0

2. Enter the number of children/families served in each postal code. If you are completing your 0–6-month report, you will be reporting against the anticipated numbers that were entered into the application.
3. If you served children/families in postal codes **not listed in your application**, use the **selection box** to add additional postal codes served.
 - If you did not serve any children/families in a listed postal code, you must enter a **zero**.
4. Once the **Narrative**, **Demographic**, and **Postal Code Reporting** sections are complete, click **Submit**.



64014

Number of Children < The number here are the projections that were filled out in the application.

Number of Families

0-6 Month Reported Reach: < Fill out the actuals here.

Number of Children

Number of Families

Please note: the demographic number of children and families served **MUST** match the postal code number of children and families.

If you begin the report but plan to return later to finish it, click **Save and Close** before leaving the form.