PROJECT BROADBAND GRANT - BUDGET FORM

Grantee Name	Program Contact Name, Title, Phone and Email	
Budget Period	Fiscal Contact Name, Title, Phone and Email	
Project Name		

Expenditure Categories

Personal Services Salaried Employees

List all salaried personnel to perform work for the project. Include proposed salaries and time and effort percentage (full time equivalent or FTE). In the justification, include the role and expected contribution of budgeted personnel.

Position Title	Description of Work	Gross or Annual Salary	Percent of Time on Project	Total Amount Requested
				\$ -
				\$ -
				\$ -

Personal Services Hourly Employees

List all hourly personnel to perform work for the project. Include proposed salaries and time and effort percentage (full time equivalent or FTE). In the justification, include the role and expected contribution of budgeted personnel.

Position Title	Description of Work	Hourly Wage	Total # of Hours on Project	Total Amo Requeste	
				\$	-
				\$	-
				\$	-
				\$	-
				\$	-
Total Parsonal Sorvices			nal Camilana	ć	

Supplies & Operating Expenses

Include list of all allowable operating expenses. The justification should describe the rationale, necessity and reasonableness of the operation costs budgeted.

ltem	Description of Item	Rate	Quantity	Total Am Reques	
				\$	-
				\$	-
				\$	-
				\$	-
				\$	-
	T	otal Supplies	& Operating	Ś	

Travel

Include all travel and indicate whether in-state or out-of-state	. Include costs for attendance of any mandat	tory meetings. Include appropriat	e per diem, mileage or airfare
1	rates or include link to current approved rate	25.	

Item	Description of Item	Rate	Quantity	Total Amor Requeste	
				\$	
				\$	-
				\$	-
			Total Travel	¢	

Equipment

Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000.

Item	Description of Item	Rate	Quantity	Total Amount Requested

Other Costs

Include all other allowable costs. The justification should describe the rationale, necessity and reasonableness of other costs budgeted.

Item	Description of Item	Rate	Quantity	Total Amount Requested
				\$ -

Total Equipment & Other Costs \$

Contractual

Include all subcontracts planned to complete the proposed work. This includes, but not limited to, consulting and personal services subcontracts. Restrictions outline in the budget guidelines, including cost reimbursement terms, shall also apply to subcontracts. No subcontractor may be pre-paid for services. Describe how the subcontractor will be selected, the work to be performed, how the costs were calculated and expected deliverables.

Subcontractor Name	Description of Item	Rate	Quantity	Total Amo Request	
				\$	-
				\$	-
				\$	-
		Total	Contractual	\$	-

SUB-TOTAL OF DIRECT COSTS \$

Indirect

Item	Description of Item	Rate of Indirect	I	
			\$	-
			\$	-
			\$	-
	То	tal Indirect	\$	-

	TOTAL	\$	-
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