**HRIF RFA**

**Attachment 4 B-I**

**Budget Detail Work Sheet**

**(Year 1)**

**(July 1, 2006 – June 30, 2007)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Personnel | | | | | | | | | | | | | |
| Position Title and No of each | | | Salary Rate/Range | | | | | FTE % | | Annual Cost | |  |  |
|  | | | $ | | | | |  | | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |
|  | | | $ | | | | |  | | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |
|  | | | $ | | | | |  | | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |
|  | | |  | | | | |  | | **Total Personnel** | | $ |  |
|  | | |  | | | | |  | |  | |  |  |
| **Fringe Benefits** (\_\_ % of applicable Personnel) | | | | | | | | | |  | | $ |  |
|  | | | | | | | | | | | |  |  |
| **Operating Expenses** | | | | | | | | | | | | | |
| Expense Description | | | | | | | Cost | | |  | |  |  |
|  | | | | | | | $\_\_\_\_\_\_\_\_\_\_\_\_ | | |  | |  |  |
|  | | | | | | | $\_\_\_\_\_\_\_\_\_\_\_\_ | | |  | |  |  |
|  | | | | | | | $\_\_\_\_\_\_\_\_\_\_\_\_ | | |  | |  |  |
|  | | | | | | | | | | **Total Operating** | | $ |  |
|  | | | | | | | | | |  | |  |  |
| **Equipment** | | | | | | | | | | | | | |
| Equipment Description | | | | # of Units | | | Unit Cost | | | Total Cost | |  |  |
|  | | | |  | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |
|  | | | |  | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |
|  | | | |  | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |
|  | | | | | | | | | | **Total Equipment** | | $ |  |
|  | | | | | | | | | |  | |  |  |
| **Travel** | | | | | | | | | |  | | $ |  |
|  | | | | | | | | | | | |  |  |
| **Subcontracts** [Include a Subcontractor Budget attachment if more than 2 subcontracts are expected.] | | | | | | | | | | | | | |
| Name of Subcontractor: | | | | | | | | | | | | | |
| Personnel | Gen. Exp. | Travel | | | Subcontracts | | | Indirect Costs | | | Total Cost |  |  |
| $\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_ | | | $\_\_\_\_\_\_\_\_\_\_\_\_ | | | $\_\_\_\_\_\_\_\_\_\_\_ | | | $\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
|  |  |  | | |  | | |  | | |  |  |  |
| Name of Subcontractor: | | | | | | | | | | | | | |
| Personnel | Gen. Exp. | Travel | | | Subcontracts | | | Indirect Costs | | | Total Cost |  |  |
| $\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_ | | | $\_\_\_\_\_\_\_\_\_\_\_\_ | | | $\_\_\_\_\_\_\_\_\_\_\_ | | | $\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
|  | | | | | | | | | | |  |  |  |
| Name of Subcontracted Project (If Subcontractor is unknown): | | | | | | | | | | |  |  |  |
|  | | | | | | | | | | | $\_\_\_\_\_\_\_\_\_\_\_ |  |  |
|  | | | | | | | | | | | |  |  |
|  | | | | | | | | | **Total Subcontracts** | | | $ |  |
| **Other Costs** | | | | | | | | | | | | | |
| Item Description | | | | | | Cost | | |  | | | | |
|  | | | | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  | | | | |
|  | | | | | | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  | | | | |
|  | | | | | | | | | **Total Other Costs** | | | $ |  |
|  | | | | | | | | |  | | |  |  |
| **Indirect Costs** (\_\_% of Personnel including benefits) | | | | | | | | |  | | | $ |  |
| \*\*Cannot exceed 22%. | | | | | | | | | **Total Costs** | | | **$** |  |

Copy this format or use a similar one and use as many sheets as are necessary.

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