**Appendix B: Overall Budget Form**

|  |
| --- |
|  |
| **BUDGET CATEGORY *(Add/remove itemizing lines below major categories as necessary, but do NOT delete major categories)*** | ***GRANT******REQUEST*** |
| **A. PERSONNEL (list individual names and titles below)** | **$** |
|  | **$** |
|  | **$** |
|  | **$** |
| **B. FRINGE BENEFITS % of (e.g., 10% of****total personnel costs) TOTAL:** | **$** |
| **C. TRAVEL (estimate number/purpose of trips below)** | **$** |
|  | **$** |
|  |  |
|  | **$** |
| **D. EQUIPMENT (itemize below) TOTAL:** | **$** |
|  | **$** |
|  |  |
|  | **$** |
| **E. SUPPLIES (itemize below) TOTAL:** | **$** |
|  | **$** |
|  |  |
|  | **$** |
| **F. CONTRACTS (identify & itemize below) TOTAL:** | **$** |
|  | **$** |
|  | **$** |
| **G. OTHER (identify & itemize below) TOTAL:** | **$** |
|  | **$** |
|  | **$** |
| **H. TOTAL DIRECT COSTS (SUM OF A‐G)** | **$** |
| **I. INDIRECT COSTS % of (e.g., 10% of****total direct costs) TOTAL:** |  |
| **J. TOTAL PROJECT COST (SUM OF H+I)** | **$** |