

# DHHS Contract Budget

Vendor/Organization Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip Code: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Phone/Fax/E-Mail: \_\_\_\_\_  
 Contract Number: \_\_\_\_\_  
 Service Area: \_\_\_\_\_

## BUDGET SUMMARY

	FY 2015 Budget
Category	Contract Expenses
<b>A. Salary Expenses</b>	\$0.00
<b>Fringe Benefits</b> (__% of salary expenses)	
<b>Total Personnel (Salary + Fringe)</b>	\$0.00
<b>B. Direct (Operating) Expenses</b>	\$0.00
<b>C. Capital Expenses</b>	\$0.00
<b>Subtotal of Contract Expenses</b>	\$0.00
<b>Indirect/Administration</b> (__% of Subtotal of Contract Expenses)	
<b>Total Contract Budget:</b>	<b>\$0.00</b>

## BUDGET DETAIL

### A. Salary Expenses and Fringe Benefits

Position	Incumbent	Annual Salary	Full Time equivalent (FTE), this contract	Expenses to this Contract	Fringe Benefit Rate	Fringe Benefits	Justification for Position
				\$ -		\$ -	
				\$ -		\$ -	
				\$ -		\$ -	
				\$ -		\$ -	
				\$ -		\$ -	
				\$ -		\$ -	
<b>Total Salary Expenses</b>					<b>Total Fringe</b>	<b>\$ -</b>	

### B. Direct (Operating) Expenses

Expense Category	Cost	Justification of Costs

Consulting (if more than one consultant, list each one on a		\$	-
Staff Development		\$	-
Travel		\$	-
Rent		\$	-
Utilities		\$	-
Maintenance		\$	-
Telephone Bill		\$	-
Other Communications		\$	-
Equipment (up to \$5,000)*		\$	-
Maintenance		\$	-
Supplies		\$	-
Insurance		\$	-
Postage		\$	-
Printing		\$	-
Other Expenses (list)		\$	-
		\$	-
<b>Total Direct Expenses</b>		<b>\$</b>	<b>-</b>

**C. Capital Expenses, if applicable** (greater than \$5,000)\*

Description	Cost	Justification of Costs
	\$	-
	\$	-
	\$	-
<b>Total Capital Expenses</b>	<b>\$</b>	<b>-</b>

Approved by: (for the Vendor)

\_\_\_\_\_  
Signature Date

Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

Approved by: (Monitor, for the Dept. of Health and Human Services)

\_\_\_\_\_  
Signature Date

Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

\*Equipment includes items up to \$5,000. Items greater than \$5,000 are capital expenses.