

PROJECT BUDGET PLAN

1. PROJECT INFORMATION

Project Number: <i>(Assigned by Council)</i>	
Project Name: <i>(55 characters)</i>	
Date Submitted/Revised	

2. BUDGET SUMMARY SECTION

CATEGORY	PROJECT COSTS	COUNCIL FUNDS	MATCHING FUNDS
Personnel with Fringe Benefits	\$ 0.00	\$ 0.00	\$ 0.00
Personnel without Fringe Benefits	\$ 0.00	\$ 0.00	\$ 0.00
Consultant/Subcontracted Services	\$ 0.00	\$ 0.00	\$ 0.00
Travel	\$ 0.00	\$ 0.00	\$ 0.00
Supplies/Publications	\$ 0.00	\$ 0.00	\$ 0.00
Space Occupancy	\$ 0.00	\$ 0.00	\$ 0.00
Other Direct Costs	\$ 0.00	\$ 0.00	\$ 0.00
Indirect Costs	\$ 0.00	\$ 0.00	\$ 0.00
TOTALS:	\$ 0.00	\$ 0.00	\$ 0.00

The budget summary section totals will be filled in as the itemized sections are completed below.

3. BUDGET ITEMIZATION SECTION

3a. PERSONNEL WITH FRINGE BENEFITS

Fringe Benefits %	
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Title of position/Name if known	Rate	Time On Project	Project Costs	Council Funds	Matching Funds	Matching Funds Source
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
Subtotal staff remuneration:			\$0.00	\$0.00	\$0.00	
Fringe Benefit Costs (Enter Amounts for Council Funds and Matching Funds columns.)			\$0.00	\$0.00	\$0.00	
TOTAL:			\$0.00	\$0.00	\$0.00	

3b. PERSONNEL WITHOUT FRINGE BENEFITS

Title of position/Name if known	Rate	Time On Project	Project Costs	Council Funds	Matching Funds	Matching Funds Source
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
TOTAL:			\$0.00	\$0.00	\$0.00	

3c. CONSULTATION/SUBCONTRACTED SERVICES

Nature Of Expense	Rate	Time on Project	Project Costs	Council Funds	Matching Funds	Matching Funds Source
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
Total:			\$0.00	\$0.00	\$0.00	

3d. TRAVEL

Nature Of Expense	Rate per Mile or Unit	Number of Miles or Units	Project Costs	Council Funds	Matching Funds	Matching Funds Source
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	\$0.00	\$0.00	\$0.00	
Total:			\$0.00	\$0.00	\$0.00	

3e. SUPPLIES/PUBLICATIONS

Nature Of Expense	Project Costs	Council Funds	Matching Funds	Matching Funds Source
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
Total:	\$0.00	\$0.00	\$0.00	

3f. SPACE OCCUPANCY

Nature Of Expense	Rate/Sq. Ft./Yr.	Sq. Ft.	# Months	Project Costs	Council Funds	Matching Funds	Matching Funds Source
	\$0.00	0.00	0	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	0	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	0	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	0	\$0.00	\$0.00	\$0.00	
	\$0.00	0.00	0	\$0.00	\$0.00	\$0.00	
Total:				\$0.00	\$0.00	\$0.00	

3g. OTHER DIRECT COSTS

Nature Of Expense	Project Costs	Council Funds	Matching Funds	Matching Funds Source
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
Total:	\$0.00	\$0.00	\$0.00	

3h. INDIRECT COSTS

Nature Of Expense	Project Costs	Council Funds	Matching Funds	Matching Funds Source
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
	\$0.00	\$0.00	\$0.00	
Total:	\$0.00	\$0.00	\$0.00	