

9. Budget – 15 points possible

Organization Name

Insert Here

Fiscal Year 22 Detailed Budget Information

All line items included in the "BVCS ECI funds Request" column must be justified in full detail using the Narrative section. Be specific in completing this section. See instructions for allowable expenses. Insert additional rows/delete rows/adjust narrative row as necessary. Include a narrative for each dollar amount, in the Narrative section. Please contact the Program Director at bvcs.eci.director@gmail.com if you have problems with the form.

DIRECT COST			
Line Item	BVCS ECI funds requested	Other Funding	Total
Indirect Program Administrative Cost in the Narrative section provide: Administrative costs are those that are incurred for common or joint objectives and therefore cannot be identified readily and specifically in regard to a particular program, but are nevertheless necessary to the operations of the organization. For example, the cost of operating and maintaining facilities, depreciation, fiscal agent, data management and supervisory support are generally treated as indirect costs. The applicant may charge an Administrative cost not to exceed 15% of the total budget. Do not prorate expenses.			
Narrative Indirect/Admin:			
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
Subtotals	\$6.00	\$12.00	\$18.00

Salaries/Wages in the Narrative section provide: Include agency staff that provide the program services directly related to the recipients being served (direct staff). Include base salary/hourly rate of direct staff, include any formulas used (hourly rate), include percent of time involved in this project - FTE (full time or part time equivalence).

Narrative salary:			
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
Subtotals	\$6.00	\$12.00	\$18.00

Personal Benefits in the Narrative section provide: List any personnel benefits that are associated with the salary section. These could include Social Security, Workman's Compensation, Unemployment Compensation and/or Health Insurance.

Narrative Benefits/Taxes:			
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
Subtotals	\$6.00	\$12.00	\$18.00

Mileage & Travel: Mileage associated with providing a service of the program. BVCS Early Childhood Iowa will reimburse mileage at the programs established rate (State or Federal) based on the employers Policy/Procedures. Personal mileage for the commute to and from the office is not allowed. Travel includes costs for meals, lodging, ground transportation, airfare and/or mileage. While traveling instate a maximum reimbursement of \$75 plus taxes per night for lodging. Meals will be reimbursed at rates not to exceed \$8 for breakfast, \$9 for lunch and \$18 for dinner (no alcohol) and includes tax and tip up to 15%. Costs for out-of-state travel will be handled on a case-by-case basis. BVCS Early Childhood Iowa will reimburse the least expensive mode of transportation which will require written documentation reflecting that the lower rate was utilized.

Narrative Mileage & Travel:			
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
Subtotals	\$6.00	\$12.00	\$18.00

Staff Professional Development: Registration fee to attend training and conferences to increase staff knowledge and capacity. (Travel expenses to attend training are to be placed in Travel category.)

Narrative Staff Professional Development:			
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
Subtotals	\$4.00	\$8.00	\$12.00

Operational Expenses: Operating expenses must be listed separately, such as rent, telephone, office machine rental, postage, etc.

Narrative Operational Supplies:			
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
Subtotals	\$4.00	\$8.00	\$12.00

Program Supplies: Expendable office supplies, such as paper, pens, pencils, staples, etc. may be shown as a lump sum.

Narrative Program Supplies:			
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
Subtotals	\$3.00	\$18.00	\$21.00

Contracted Services: Identify any contractual or consultant agreements that will be entered into as part of this grant to directly support implementation (e.g. transportation, child care). This section is not for services that indirectly support program operations. (e.g. accounting, data management). Provide an explanation of the contractor's or consultant's role. Provide hourly or daily rate for individual contract or consultant services, and the total cost of the contract/consultant.

Narrative Contracted Services:			
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
Subtotals	\$3.00	\$24.00	\$27.00

Other (please specify): Items that reward or entice participation in program such as stipends, incentives, family meal. Or it can be used to explain budgetary items that do not readily fit in the other categories.

	\$1.00	\$2.00	\$3.00
	\$1.00	\$2.00	\$3.00
Subtotals	\$2.00	\$34.00	\$36.00

	Total COSTS		
Total Direct Cost	\$34.00	\$128.00	\$162.00
Total In-Direct Cost	\$6.00	\$12.00	\$18.00
Total Budget Cost	\$40.00	\$140.00	\$180.00
Percentage of In-Direct Cost	15.00%	8.57%	11.11%