

BUDGET

Contract Number: _____ DHR USE ONLY Taxpayer ID#: _____
 Agency: _____
 Address: _____
 Project Title: _____
 Budget Period: _____ 1-Oct-06 _____ to _____ 30-Sep-07 _____

BUDGET ITEMS	TOTAL DHR SHARE
1. PERSONNEL	\$
2. SUBCONTRACTS	\$
3. TRAVEL	\$
4. SPACE	\$
5. SUPPLIES	\$
6. EQUIPMENT	\$
7. OTHER	\$
8. BUDGET TOTAL	\$
Itemize the sources of ALL non-departmental funds:	
Total Non-DHR Funding: \$	

DHR USE ONLY

Approved for Mathematical Accuracy: _____ Assistance Payments, Finance Division _____ Date _____

5. SUPPLIES		TOTAL DHR SHARE
	Office Supplies	\$
	Computer-related Supplies	\$
	Custodial Supplies	\$
	Other (specify)	\$
	TOTAL SUPPLIES:	\$
6. EQUIPMENT	The Department's prior written approval is required for all property items having a total unit or individual cost of \$500 or greater.	TOTAL DHR SHARE
	Purchase	\$
	Rental/Lease	\$
	Repairs	\$
	Maintenance Agreements	\$
	Use Allowance	\$
	Office Furniture	\$
	Office Furnishings	\$
	Other (specify)	\$
	TOTAL EQUIPMENT:	\$
7. OTHER		TOTAL DHR SHARE
	Membership Dues (itemize and attach a separate listing)	\$
	Subscriptions (itemize and attach a separate listing)	\$
	A-133 Audit	\$
	Liability Insurance	\$
	Attorney (Legal) Fees	\$
	Other (specify)	\$
	TOTAL OTHER:	\$