APPENDIX G1a

BUDGET REQUEST AND JUSTIFICATION FORM

Organization Name:

PERSONNEL COSTS: Detail all salaries and wages required for program activities to be paid for by this request for funding. None of the funds provided may be used to pay the salary of an individual at a rate in excess of Level I of the current Executive Schedule.				**REQUEST**
SALARIES AND WAGES				
Position Title	**No. of FTE's**	**Annual Salary per**	**Request %**	
			SUB-CATEGORY TOTAL	$ -

JUSTIFICATION:

PAYROLL TAXES AND FRINGE BENEFITS: Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are only for the percentage of time			**REQUEST**
	Applicable Salary	**Rate (%)**	
FICA			-
WORKERS' COMP			-
UNEMP. INS			-
OTHER:			-
OTHER:			-
OTHER:			-
	# of FTE/ Staff *	**Cost/FTE**	
GROUP INS (Health, Life, Disability, etc.)			-
* The # of FTE/Staff should be proportionate with the % of the # of FTE's within Salaries and Wages.			
		SUB-CATEGORY TOTAL	$ -

JUSTIFICATION:

Add salaries and wages and payroll taxes/benefits		TOTAL PERSONNEL COSTS	$ -

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CONSULTANTS/CONTRACT SERVICES: (Time Needed x Rate = Requirements) List all consultant/contract personnel in order of priority need. (Consultant travel and expenses should be included in this section.) Remember to list the rate and times for each consultant. Use the Fixed Price column for fixed rate contracts only, do not use the Rate and Hours columns with a Fixed Rate contract.				REQUEST
	Fixed Rate	RATE ($/Hr)	HOURS	
	TOTAL CONSULTANTS/CONTRACTS			$

JUSTIFICATION:

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TRAVEL COSTS: This is for staff travel related to program activities. Per mile cost and per diem rates should not exceed the current state rates. Current in-state rates can be obtained from SAPTA. Show the basis of computation (i.e., cost per night for lodging x number of nights = total lodging expense). A signed Travel Claim is required when travel expenses are being claimed. Receipts are mandatory for lodging, rental cars, shuttle, taxi and parking. Training-related expenses (i.e. registration, airfare, per diem, mileage, etc.) should be listed under the "Training" category.					REQUEST
	Mileage	Rate/mile	Per Diem	Other	
			TOTAL TRAVEL COSTS		$ -

JUSTIFICATION:

TRAINING: Registration fees/conference/training costs should be included in this section. **Remember to include travel items (i.e., airfare, per diem, mileage, etc.) and other expenses related to training.** Receipts are mandatory for lodging, rental cars, shuttle, taxi and parking. Reimbursement cannot be made without the original receipt(s). A signed Travel Claim is required when training-related travel expenses are being claimed.	REQUEST
TOTAL TRAINING COSTS	$ -

JUSTIFICATION:

OPERATING COSTS: Include in this section requests to support all of the following: building space, utilities, telephone, postage, printing and copying, publication, desktop and consumable office supplies, drugs and biologicals, food expenses, and other. For each building location(s) include number of square feet, cost per square feet for rent/lease for administration and counseling. For utilities, include such items as water, heat, gas and electricity where such costs are not included in the rent/lease. For telephone, include the cost of monthly service and toll charges by site. For drug and biological costs use the average cost per month. For food expenses break out the number of meals/snacks served per day, the number of clients served per day, and the average cost per meal/snack. **Certification fees, insurance costs, and limited scope audit expenses are classified as operating items.**	
	REQUEST
TOTAL OPERATING COSTS	**$** -

JUSTIFICATION:

OTHER COSTS: Provide a description and the purpose/need for each item. The only items that are placed under the "other" category are your **A-133 Audit expenses** and indirect cost rate with a cognizant agency. Show the calculation for the cost and provide supporting information. (Total Federal Funding, Federal Funding received by SAPTA, the total of the A-133 Audit expense and the percent being requested within this budget for the A-133 Audit.)	REQUEST
TOTAL OTHER COSTS	$ -

JUSTIFICATION:

Add: Personnel, Consultants, Travel, Training, Operating, and Other	TOTAL REQUEST	$ -