## Budget & Narrative with Justification

THIS IS AN EXAMPLE OF A SAMPLE DETAILED BUDGET NARRATIVE.

You can submit other formats.

Red text is informational and can be removed. No more than 5 pages.

A. Personnel: Provide employee(s) (including names for each identified position) of the applicant/recipient organization, including in-kind costs for those positions whose work is tied to the grant project.

| **Position** | **Name** | **Annual Salary/Rate** | **Level of Effort** | **Total Salary Charged to Award** |
| --- | --- | --- | --- | --- |
| Clinical Project Director | Doctor Bob MD | $201,700 | 2.5% | $5,093 |
| Nurse Case Manager | To Be Hired | $85,808 | 100% | $85,808 |
| Public Health Nurse | Sally Smith | $84,503 | 2.5% | In-kind |
| Multimedia Specialist | John Johnson | $65,169 | 5% | $3,258 |
|  |  |  | **FEDERAL REQUEST** | **$94,159** |

**JUSTIFICATION:** **Describe the role and responsibilities of each position.**

**Clinical Project Director:** Doctor Bob, MD, Clinic Chief Medical Officer (.025 FTE) assures executive-level overall compliance with granting source requirements, evaluating program effectiveness by review of program reports, evaluation, and statistics. NOTE: Dr. Bob is 1.0 FTE at XXX Clinic.

**Nurse Case Manager:** To Be Hired (1.0 FTE) provides direct care and clinical services for dementia patients, performs mini cog assessments, and conducts outreach at community events and gatherings. Works in conjunction with the outside treatment facilities, internal clinic departments, and the PHN to ensure patient needs are met.

**Public Health Nurse (PHN):** Sally Smith, Medical Department (.025 FTE in-kind) supervision and management of direct care and clinical services. Oversees data collection/ management for the project as well as assists with coordination between clinic departments. Works in conjunction with the Nurse Case Manager and Project Director to ensure deliverables are met.

**Multimedia Specialist:** John Johnson, Multimedia Specialist (0.05 FTE) works in collaboration with the Director of Health Promotion and Marketing to design and implement outreach and awareness campaigns to support education in dementia, design of educational materials and the development of a program logo. Creates early recognition campaign.

**Key staff positions require prior approval after a review of credentials of resume and job description.**

The key staff positions must be included in the Personnel section and/or the Contractual Section (F). In addition, the Project Director must be the same as the Project Director named in the SF-424.

B. Fringe Benefits: List all components of fringe benefits rate

| **Position** | **Name** | **Fringe Rate** | **Total Salary Charged to Award** | **Total Fringe Charged to Award** |
| --- | --- | --- | --- | --- |
| Clinical Project Director | Doctor Bob MD | 35% | $5,093 | $1,783 |
| Nurse Case Manager | To Be Hired | 35% | $85,808 | $30,033 |
| Public Health Nurse | Sally Smith | 35% | In-kind | In-kind |
| Multimedia Specialist | John Johnson | 35% | $3,258 | $1,140 |
|  |  |  | **FEDERAL REQUEST** | **$32,956** |

**JUSTIFICATION:** Fringe reflects current rate for agency**.** FICA: 7.65%, SUI: 1.25%, Worker’s Compensation: 1.85%, Retirement: 5%, Insurances (Medical, Dental, Life): 19.25% = 35%

C. Travel: Explain need for all travel other than that required by this application. Local travel policies prevail.

| **Purpose of Travel** | **Location** | **Item** | **Rate** | **Cost** |
| --- | --- | --- | --- | --- |
| (1) Grantee Conference  | Washington, DC | Airfare | $200/flight x 2 persons | $400 |
|  |  | Hotel | $180/night x 2 persons x 2 nights | $720 |
|  |  | Per Diem (meals and incidentals) | $46/day x 2 persons x 2 days | $184 |
| (2) Local travel |  | Mileage | 3,000 miles@.38/mile | $1,089 |
|  |  |  | **FEDERAL REQUEST** | **$2,396** |

JUSTIFICATION: Describe the purpose of travel and how costs were determined.

1. Two staff (Project Director and Evaluator) to attend grantee meeting in Washington, DC.
2. Local travel is needed for patient care and assessment, to attend tribal meetings, local events, cultural activities, and gatherings, for outreach and promotion. Mileage includes travel to and from planned program activities. Estimated at approximately 138.5 miles/month x 12 months x $0.655/mile = $1089.

D. Equipment: an article of tangible, nonexpendable, personal property having a useful life of more than one year and an acquisition cost of $5,000 or more per unit – federal definition.

**FEDERAL REQUEST** **$0**

E. Supplies: materials costing less than $5,000 per unit and often having one-time use

| **Item(s)** | **Rate** | **Cost** |
| --- | --- | --- |
| General office supplies | $50/mo. x 12 mo. | $600 |
| Copies | 8000 copies x .10/copy | $800 |
| Postage | $37/mo. x 8 mo. | $296 |
| Laptop Computer | $900 | $900 |
| Printer | $300 | $300 |
| Projector | $900 | $900 |
|  | **FEDERAL REQUEST** | **$3,796** |

**JUSTIFICATION: Describe the need and include an adequate justification of how each cost was estimated.**

1. Office supplies, copies and postage are needed for general operation of the project.
2. The laptop computer is needed for both project work and presentations.
3. The projector is needed for presentations and outreach workshops.

**All costs were based on retail values at the time the application was written.**

F. Contract:

A contractual arrangement to carry out a portion of the programmatic effort or for the acquisition of routine goods or services under the grant. Such arrangements may be in the form of consortium agreements or contracts.

A **consultant** is an individual retained to provide professional advice or services for a fee. The applicant/grantee must establish written procurement policies and procedures that are consistently applied. All procurement transactions shall be conducted in a manner to provide, to the maximum extent practical, open, and free competition.

COSTS FOR CONTRACTS MUST BE BROKEN DOWN IN DETAIL AND NARRATIVE JUSTIFICATION. IF APPLICABLE, NUMBERS OF CLIENTS SHOULD BE INCLUDED IN THE COSTS.

| Name | Service | Rate | Other | Cost |
| --- | --- | --- | --- | --- |
| (1) State Department of Human Services | Training  | $250/individual x 3 staff | 5 days | $750 |
| (2) Treatment Services | 1040 Clients  | $27/client per year |  | $28,080 |
| (3) Jane Doe (Case Manager) | Treatment Client Services | 1FTE @ $27,000 + Fringe Benefits of $6,750 = $33,750 | **\***Travel at 3,124 @ .50 per mile = $1,562**\***Training course $175 **\***Supplies @ $47.54 x 12 months or $570**\***Telephone @ $60 x 12 months = $720**\***Indirect costs = $9,390 (negotiated with contractor) | $46,167 |
| (4) Jane Doe | Evaluator | $40 per hour x 225 hours | 12 month period  | $9,000 |
| (5) To Be Announced | Marketing Coordinator | Annual salary of $30,000 x 10% level of effort  |  | $3,000 |
|  |  |  | **FEDERAL REQUEST** | **$86,997** |

**JUSTIFICATION:** **Explain the need for each contractual agreement and how they relate to the overall project.**

1. Certified trainers are necessary to carry out the purpose of the statewide consumer Network by providing caregiver wellness training, preparing consumer leaders statewide, and educating the public on behavioral symptom management.
2. Treatment services for clients to be served based on organizational history of expenses.
3. Case manager is vital to client services related to the program and outcomes.
4. Evaluator is provided by an experienced individual (Ph.D. level) with expertise in dementia, research, and evaluation and is knowledgeable about the target population and will report project performance data.
5. Marketing Coordinator will develop a plan to include public education and outreach efforts to engage clients of the community about grantee activities, provision of presentations at public meetings and community events to stakeholders, community civic organizations, churches, agencies, family groups and schools.

**\* Represents separate/distinct requested funds by cost category**

G. Construction: **NOT ALLOWED**

H. Other: expenses not covered in any of the previous budget categories

| Item | Rate | Cost |
| --- | --- | --- |
| (1) Presenter speaker fees | 22 speakers x $150 fee | $3,300 |
| (2) Telephone | $100/mo. x 12 mo. | $1,200 |
| (3) Client Incentives | $10/client follow-up x 278 clients  | $2,780 |
| (4) Brochures/ educational materials | .89/brochure X 1500 brochures | $1,335 |
|  | **FEDERAL REQUEST** | **$4,115** |

JUSTIFICATION: Break down costs into cost/unit (e.g. cost/square foot, etc.). Explain the use of each item requested.

(1) Presenter speaker fees will be provided to presenters at quarterly education sessions for Clinic providers (4), monthly caregiver training sessions (12), and an annual dementia awareness symposium (6). The Clinical Project Director will select presenters and will be compensated for their time and effort through honorariums.

(2) The monthly telephone costs reflect the % of effort for the personnel listed in this application for the IHS project only.
(3) Client incentives include small promotional items/products to be given out at informational/resource booths to create program awareness, such as stress balls, tote bags, pens and notebooks, keychains, etc., estimated at $10/ client x 278 clients.
(4) Educational materialsfor patients on dementia and reproduction of materials from local resources (i.e., Alzheimer’s Association) on dementia, early warning signs and caregiver services will be used at various community functions (health fairs and exhibits).

All costs are the value placed on the service at the time of this grant application.

\*If rent is requested (direct or indirect), provide the name of the owner(s) of the space/facility. If anyone related to the project owns the building which is less than an arms-length arrangement, provide cost of ownership/use allowance calculations. Additionally, the lease and floor plan (including common areas) is required for all projects allocating rent costs.

J. Indirect Charges: indirect costs to be charged to the grant

Indirect cost rate: Indirect costs can only be claimed if your organization has a negotiated indirect cost rate agreement or cost allocation plan. It is applied only to direct costs to the agency as allowed in the agreement or cost allocation plan.

| DHHS Approved Indirect Rate | Total Direct Costs | Cost |
| --- | --- | --- |
| 32% | **224,419.00** | $71,814.08 |
|  | **FEDERAL REQUEST** | **$71,814.08** |

Attach a copy of the current fully executed, negotiated agreement indirect cost rate agreement or cost allocation plan. The applicable indirect cost rate(s) negotiated by the organization with the cognizant negotiating agency must be used in computing indirect costs (F&A) for a proposal (2 CFR §200.414). The amount for indirect costs should be calculated by applying the current negotiated indirect cost rate(s) to the approved base(s)

**Budget Summary**

|  |  |  |  |
| --- | --- | --- | --- |
| **Object Class Category** | **YEAR 1****FEDERAL REQUEST** | **YEAR 2****FEDERAL REQUEST** | **YEAR 3****FEDERAL REQUEST** |
| Personnel | $94,159 | $94,159 | $94,159 |
| Fringe Benefits | $32,956 | $32,956 | $32,956 |
| Travel | $2,396 | $2,396 | $2,396 |
| Equipment | $0 | $0 | $0 |
| Supplies | $3,796 | $3,796 | $3,796 |
| Contractual | $86,997 | $86,997 | $86,997 |
| Construction | $0 | $0 | $0 |
| Other | $4,115 | $4,115 | $4,115 |
| Total Direct Charges | $224,419.00 | $224,419.00 | $224,419.00 |
| Indirect Charges | $71,814.08 | $71,814.08 | $71,814.08 |
| TOTAL (Total Direct + Total Indirect) | $296,233.08 | $296,233.08 | $296,233.08 |