

Organization Name: \_\_\_\_\_

**TWELVE-MONTH BUDGET SUMMARY BY OBJECT OF EXPENSE**

OBJECT OF EXPENSE	LOCAL SHARE* BUDGETED	% OF TOTAL BUDGET	UCS FUNDS BUDGETED	TOTAL COST BUDGETED
A. Personnel Costs				
B. Non-Personnel Services				
1. Supplies				
2. Equipment				
3. Occupancy				
4. Miscellaneous				
5. Administrative				
Total NPS				
Total Operating Budget				

\*Include amounts for all funds other than UCS Funds, including in-kind contributions to be used in support of the proposed project. The source of all local match monies must be indicated on Budget Form C - Anticipated Revenue.

**BUDGET FORM A - - PERSONNEL SERVICES WORKSHEET**

POSITION TITLE	SALARY BUDGETED	% TIME ON PROJECT BUDGETED	LOCAL SHARE BUDGETED	UCS FUNDS BUDGETED	TOTAL COST BUDGETED
Personnel Total					
Fringe Benefits Total ____% Rate					
Total Personnel Services Costs					



**BUDGET FORM B.2 -- EQUIPMENT WORKSHEET**

ITEM	LOCAL SHARE BUDGETED	UCS FUNDS BUDGETED	TOTAL COST BUDGETED
Total Equipment Costs			

**BUDGET FORM B.3 -- OCCUPANCY COSTS WORKSHEET**

ITEM	LOCAL SHARE BUDGETED	UCS FUNDS BUDGETED	TOTAL COST BUDGETED
Real Estate Rentals			
Utilities			
General Liability Insurance			
Other			
Total Occupancy Costs			

**BUDGET FORM B.4 -- MISCELLANEOUS COSTS WORKSHEET**

ITEM	LOCAL SHARE BUDGETED	UCS FUNDS BUDGETED	TOTAL COST BUDGETED
Total Miscellaneous Costs			

**BUDGET FORM B.5 -- ADMINISTRATIVE COSTS WORKSHEET**

ITEM	LOCAL SHARE BUDGETED	UCS FUNDS BUDGETED	TOTAL COST BUDGETED
Printing			
Copying			
Postage and Shipping			
Telephone and Fax			
Professional Insurance			
Other			
Total Administrative Costs			

**BUDGET FORM C -- ANTICIPATED REVENUE**

ITEM	SOURCE	AMOUNT
Cash Donations		
In-Kind Donations		
Staff Positions		
Local Government Spending		
Grants		
Total Anticipated Revenue		