

ATTACHMENT V - BUDGET – Alternatives To Abortion RFP

PROPOSER _____ ADDRESS _____
 _____ REGION (ES) SERVED _____
 _____ BUDGET PERIOD _____

NOTE All budget justifications including computation of this budget must be retained and provided upon request. If more space is needed, the proposer may attach additional sheets utilizing the same format for the appropriate section.

NUMBER OF MONTHS IN BUDGET PERIOD

SECTION 1. PERSONNEL SERVICES - (Contracted/hourly employees not included)

Proposer should complete this section only for expenses that will be invoiced to the contract. Proposer should attach a cost allocation table for all positions that will be invoiced at less than 100% to the Program. Percentage of salary charged to contract should correlate to the actual percentage of time worked in the program.

NAME POSITION/TITLE	TOTAL SALARY (from all sources) MONTH (Fringes not included)	% CONTRACT SALARY	AMOUNT CONTRACT SALARY MONTHLY	BUDGET PERIOD TOTAL SALARY (Monthly salary x # months) no fringes
1				
2				
3				
4				
5				
6				
7				
8				
TOTAL				
ADDITIONAL SHEET 1A TOTAL				
SECTION 1. TOTAL				

Fringe Note: The Proposer should Itemize the fringe benefits for each position listed. Fringe benefits should not be included in gross salary.

Position/Title	Retirement	Insurance	FICA	UI	Workers Comp	Other	Monthly Total	% To Contract	Monthly To Contract	Budget Period Total
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
Total										

SECTION 2. OPERATING EXPENSES

The Proposer should complete this section only for expenses identified to the contract. If the charge to the contract is less than 100 %, the Proposer should attach a cost allocation table. If additional expenses are to be budgeted, proposer should add an additional sheet with complete description of item and costs.

LINE ITEM	BUDGET PERIOD TOTAL
BUILDING RENT	
PRINTING	
UTILITIES	
TELEPHONE	
TRAVEL (Must follow State Travel Regulations)	
POSTAGE	
OFFICE SUPPLIES	
COPY MACHINE	
TOTAL	

SECTION 3. MATERIAL & SUPPLIES

The Proposer should complete this section only for expenses identified to the contract.

LINE ITEM	BUDGET PERIOD TOTAL
TOTAL	

SECTION 4. ADMINISTRATION/INDIRECT COST

The Proposer should complete this section only for expenses identified to the contract. Administrative costs for TANF funded services should be no more than 10% of the total budget amount. The Proposer should attach justification for each cost delineated.

LINE ITEM	BUDGET PERIOD TOTAL
TOTAL	

SECTION 5. CAPITAL PURCHASES: **NOTE:** All capital purchases require prior written approval from DCFS, after approval of contract.

The Proposer should complete this section only for expenses identified to the contract.

ITEM (be specific)	BUDGET PERIOD TOTAL
TOTAL	

SECTION 6. OTHER CHARGES

The Proposer should complete this section only for expenses identified to the contract. The Proposer should attach a detailed explanation of these charges. If the charge to the contract is less than 100%, the Proposer should include a cost allocation table in the explanation.

(Subcontracts and non-salaried personnel should be included in this section.)

CHARGE (be specific)	BUDGET PERIOD TOTAL
TOTAL	

BUDGET SUMMARY

BUDGET ITEM	BUDGET PERIOD TOTAL
Section 1 Salary & Fringe	
Section 2 Operating Expense	
Section 3 Material and Supplies	
Section 4 Administration/Indirect Costs	
Section 5 Capital Purchases	
Section 6 Other Charges	
TOTAL	