**RFQ BUDGET SUMMARY**

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| --- | --- | --- |
|   | **(1) Budget Line Items** | **(2) Budget Totals** |
| **A. DIRECT PROGRAM COSTS** |
|   | **1** | **Staff Salaries** |   |
| **2** | **Staff Fringe** |   |
| **3** | **Travel** |   |
| **4** | **Rent/ Utilities** |   |
| **5** | **Equipment - Lease/ Maintenance/ Purchase** |   |
| **6** | **Other Direct Costs** |   |
|   | **a. Supplies - Office/ Postage/ Other** |   |
|   | **b. Telephone/ Internet** |   |
|   | **c. Staff Training** |   |
|   | **d. Conferences/ Meetings** |   |
|   | **e. Printing/ Copying** |   |
|  | **f. Other: Staff Training** |   |
| **7** | **Insurance & Bonding** |   |
| **8** | **Contractual/ Outsourced - identify** |   |
| **9** | **Sub-Total Program Costs** |   |
| **B. PARTICIPANT COSTS** |
|   | **1** | **Participant Wages/ Stipends** |   |
| **2** | **Participant Taxes/ Fringe** |   |
| **3** | **Participant Supplies/ Training Needs Supplies** |   |
| **4** | **Sub-Total Participant Cost** |   |
| **C. ADMINISTRATIVE COSTS** |
|   | **1** | **Staff Salaries** |   |
| **2** | **Staff Fringe** |   |
| **3** | **Audit/ Legal** |   |
| **4** | **Indirect Costs**  |   |
| **5** | **Sub-Total Administrative Costs** |   |
| **D. TOTAL AMOUNT (A+B+C):** |   |

Please provide a detailed budget narrative in a separate document.