

Budget Summary

Use this table to itemize your organization's proposed budget. You may modify the table to include additional items to reflect all costs associated with each of the main categories, or describe the cost type in the area provided below the table.

Organization's Name:

	Budget Category	State Funding Requested	Matching Funds	Total Proposed
A	Labor costs, including salary and fringe benefits			
	1. Salary			
	2. Fringe benefits			
	3. Other associated costs (describe below)			
B	Supply and equipment costs for training purposes			
	1. General supplies			
	2. Audio/Visual equipment			
	3. Equipment for hands-on training			
	4. Other associated costs (describe below)			
C	Cleaning supplies for residents			
D	Blood lead screening event and testing costs			
	1. Blood sampling collection supplies			
	2. Analytical laboratory costs			
	3. Mileage			
	4. Per diem			
	3. Other associated costs (describe below)			
E	Training facility costs			
	1. Rent or lease costs			
	2. Other associated costs (describe below)			
F	Administrative costs*			
	Total			

* Restricted up to 7.5% of the total annual appropriation.

Additional descriptions for associated costs (attach additional pages if necessary)