

# Budget Detail Worksheet

**Purpose:** The Budget Detail Worksheet may be used as a guide to assist you in the preparation of the budget and budget narrative. You may submit the budget and budget narrative using this form or in the format of your choice (plain sheets, your own form, or a variation of this form). However, all required information (including the budget narrative) must be provided. Any category of expense not applicable to your budget may be deleted.

**A. Personnel** - List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization.

| Name/Position | Computation | Cost               |
|---------------|-------------|--------------------|
|               |             | <b>TOTAL</b> _____ |

**B. Fringe Benefits** - Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in budget category (A) and only for the percentage of time devoted to the project. Fringe benefits on overtime hours are limited to FICA, Workman's Compensation, and Unemployment Compensation.

| Name/Position | Computation | Cost   |
|---------------|-------------|--|
|               |             | <b>TOTAL</b> _____                                 |
|               |             | <b>Total Personnel &amp; Fringe Benefits</b> _____ |

**C. Travel** - Itemize travel expenses of project personnel by purpose (e.g., staff to training, field interviews, advisory group meeting, etc.). Show the basis of computation (e.g., six people to 3-day training at \$X airfare, \$X lodging, \$X subsistence). In training projects, travel and meals for trainees should be listed separately. Show the number of trainees and the unit costs involved. Identify the location of travel, if known. Indicate source of Travel Policies applied, Applicant or Federal Travel Regulations.

| Purpose of Travel | Location | Item | Computation | Cost |
|-------------------|----------|------|-------------|------|
|-------------------|----------|------|-------------|------|

**TOTAL** \_\_\_\_\_

**D. Equipment** - List non-expendable items that are to be purchased. Non-expendable equipment is tangible property having a useful life of more than two years and an acquisition cost of \$5,000 or more per unit. (Note: Organization's own capitalization policy may be used for items costing less than \$5,000). Expendable items should be included either in the "supplies" category or in the "Other" category. Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the "Contractual" category. Explain how the equipment is necessary for the success of the project. Attach a narrative describing the procurement method to be used.

| Item | Computation | Cost |
|------|-------------|------|
|------|-------------|------|

**TOTAL** \_\_\_\_\_

**E. Supplies** - List items by type (office supplies, postage, training materials, copying paper, and expendable equipment items costing less than \$5,000, such as books, hand held tape recorders) and show the basis for computation. (Note: Organization's own capitalization policy may be used for items costing less than \$5,000). Generally, supplies include any materials that are expendable or consumed during the course of the project.

| Supply Items | Computation | Cost               |
|--------------|-------------|--------------------|
|              |             | <b>TOTAL</b> _____ |

**F. Construction** - As a rule, construction costs are not allowable. In some cases, minor repairs or renovations may be allowable. Check with the program office before budgeting funds in this category.

| Purpose | Description of Work | Cost               |
|---------|---------------------|--------------------|
|         |                     | <b>TOTAL</b> _____ |

**G. Consultants/Contracts** - Indicate whether applicant's formal, written Procurement Policy or the Federal Acquisition Regulations are followed.

**Consultant Fees:** For each consultant enter the name, if known, service to be provided, hourly or daily fee (8-hour day), and estimated time on the project. Consultant fees in excess of \$450 per day require additional justification and prior approval from OJP.

| Name of Consultant | Service Provided | Computation | Cost |
|--------------------|------------------|-------------|------|
|--------------------|------------------|-------------|------|

*Subtotal* \_\_\_\_\_

**Consultant Expenses:** List all expenses to be paid from the grant to the individual consultants in addition to their fees (i.e., travel, meals, lodging, etc.)

| Item | Location | Computation | Cost |
|------|----------|-------------|------|
|------|----------|-------------|------|

*Subtotal* \_\_\_\_\_

**Contracts:** Provide a description of the product or service to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100,000.

| Item | Cost |
|------|------|
|------|------|

*Subtotal* \_\_\_\_\_

**TOTAL** \_\_\_\_\_

**H. Other Costs** - List items (e.g., rent, reproduction, telephone, janitorial or security services, and investigative or confidential funds) by major type and the basis of the computation. For example, provide the square footage and the cost per square foot for rent, or provide a monthly rental cost and how many months to rent.

| Description | Computation | Cost               |
|-------------|-------------|--------------------|
|             |             | <b>TOTAL</b> _____ |

**I. Indirect Costs** - Indirect costs are allowed only if the applicant has a Federally approved indirect cost rate. A copy of the rate approval, (a fully executed, negotiated agreement), must be attached. If the applicant does not have an approved rate, one can be requested by contacting the applicant's cognizant Federal agency, which will review all documentation and approve a rate for the applicant organization, or if the applicant's accounting system permits, costs may be allocated in the direct costs categories.

| Description | Computation | Cost               |
|-------------|-------------|--------------------|
|             |             | <b>TOTAL</b> _____ |

**Budget Summary**- When you have completed the budget worksheet, transfer the totals for each category to the spaces below. Compute the total direct costs and the total project costs. Indicate the amount of Federal requested and the amount of non-Federal funds that will support the project.

| <b>Budget Category</b>          | <b>Amount</b> |
|---------------------------------|---------------|
| <b>A. Personnel</b>             | _____         |
| <b>B. Fringe Benefits</b>       | _____         |
| <b>C. Travel</b>                | _____         |
| <b>D. Equipment</b>             | _____         |
| <b>E. Supplies</b>              | _____         |
| <b>F. Construction</b>          | _____         |
| <b>G. Consultants/Contracts</b> | _____         |
| <b>H. Other</b>                 | _____         |
| <b>Total Direct Costs</b>       | _____         |
| <b>I. Indirect Costs</b>        |               |
| <b>TOTAL PROJECT COSTS</b>      | _____         |
| <b>Federal Request</b>          | _____         |
| <b>Non-Federal Amount</b>       | _____         |

*Sample Budget Detail  
Worksheet*

# Budget Detail Worksheet

**Purpose:** The Budget Detail Worksheet may be used as a guide to assist you in the preparation of the budget and budget narrative. You may submit the budget and budget narrative using this form or in the format of your choice (plain sheets, your own form, or a variation of this form). However, all required information (including the budget narrative) must be provided. Any category of expense not applicable to your budget may be deleted.

**A. Personnel** - List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization.

| Name/Position                    | Computation                         | Cost             |
|----------------------------------|-------------------------------------|------------------|
| <i>John Smith, Investigator</i>  | <i>(\$50,000 x 100%)</i>            | <i>\$50,000</i>  |
| <i>2 Investigators</i>           | <i>(\$50,000 x 100% x 2)</i>        | <i>\$100,000</i> |
| <i>Secretary</i>                 | <i>(\$30,000 x 50%)</i>             | <i>\$15,000</i>  |
| <i>Cost of living increase</i>   | <i>(\$165,000 x 2% x .5 yr.)</i>    | <i>\$1,650</i>   |
| <i>Overtime per investigator</i> | <i>(\$37.50/hr. x 100 hrs. x 3)</i> | <i>\$11,250</i>  |

*The three investigators will be assigned exclusively to homicide investigations. A 2% cost of living adjustment is scheduled for all full-time personnel 6 months prior to the end of the grant. Overtime will be needed during some investigations. A half-time secretary will prepare reports and provide other support to the unit.*

**TOTAL \$177,900**

**B. Fringe Benefits** - Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in budget category (A) and only for the percentage of time devoted to the project. Fringe benefits on overtime hours are limited to FICA, Workman's Compensation, and Unemployment Compensation.

| Name/Position                     | Computation                    | Cost            |
|-----------------------------------|--------------------------------|-----------------|
| <i>Employer's FICA</i>            | <i>(\$177,900 x 7.65%)</i>     | <i>\$13,609</i> |
| <i>Retirement</i>                 | <i>*(\$166,650 x 6%)</i>       | <i>\$9,999</i>  |
| <i>Uniform Allowance</i>          | <i>(\$50/mo. x 12 mo. x 3)</i> | <i>\$1,800</i>  |
| <i>Health Insurance</i>           | <i>*(\$166,650 x 12%)</i>      | <i>\$19,998</i> |
| <i>Workman's Compensation</i>     | <i>(\$177,900 x 1%)</i>        | <i>\$1,779</i>  |
| <i>Unemployment Compensation</i>  | <i>(\$177,900 x 1%)</i>        | <i>\$1,779</i>  |
| <i>*(\$177,900 less \$11,250)</i> |                                |                 |

**TOTAL \$48,964**

**Total Personnel & Fringe Benefits \$226,864**

**C. Travel** - Itemize travel expenses of project personnel by purpose (e.g., staff to training, field interviews, advisory group meeting, etc.). Show the basis of computation (e.g., six people to 3-day training at \$X airfare, \$X lodging, \$X subsistence). In training projects, travel and meals for trainees should be listed separately. Show the number of trainees and the unit costs involved. Identify the location of travel, if known. Indicate source of Travel Policies applied, Applicant or Federal Travel Regulations.

| <b>Purpose of Travel</b> | <b>Location</b>      | <b>Item</b>            | <b>Computation</b>                              | <b>Cost</b>    |
|--------------------------|----------------------|------------------------|---|----------------|
| <i>Training</i>          | <i>Boston</i>        | <i>Airfare</i>         | <i>(\$150 x 2 people x 2 trips)</i>             | <i>\$600</i>   |
|                          |                      | <i>Hotel</i>           | <i>(\$75/night x 2 x 2 people x 2 trips)</i>    | <i>\$600</i>   |
|                          |                      | <i>Meals</i>           | <i>(\$35/day x 3 days x 2 people x 2 trips)</i> | <i>\$420</i>   |
| <i>Investigations</i>    | <i>New York City</i> | <i>Airfare</i>         | <i>(\$600 average x 7)</i>                      | <i>\$4,200</i> |
|                          |                      | <i>Hotel and Meals</i> | <i>(\$100/day average x 7 x 3 days)</i>         | <i>\$2,100</i> |

*Two of the investigators will attend training on forensic evidence gathering in Boston in October and January. The investigators may take up to seven trips to New York City to follow up investigative leads. Travel estimates are based on applicant's formal written travel policy.*

**TOTAL \$7,920**

**D. Equipment** - List non-expendable items that are to be purchased. Non-expendable equipment is tangible property having a useful life of more than two years and an acquisition cost of \$5,000 or more per unit. (Note: Organization's own capitalization policy may be used for items costing less than \$5,000). Expendable items should be included either in the "supplies" category or in the "Other" category. Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the "Contractual" category. Explain how the equipment is necessary for the success of the project. Attach a narrative describing the procurement method to be used.

| <b>Item</b>                      | <b>Computation</b>   | <b>Cost</b>    |
|----------------------------------|----------------------|----------------|
| <i>3 - 486 Computer w/CD ROM</i> | <i>(\$2,000 x 3)</i> | <i>\$6,000</i> |
| <i>Video Camera</i>              | <i>\$1,000</i>       | <i>\$1,000</i> |

*The computers will be used by the investigators to analyze case and intelligence information. The camera will be used for investigative and crime scene work.*

**TOTAL \$7,000**

**E. Supplies** - List items by type (office supplies, postage, training materials, copying paper, and expendable equipment items costing less than \$5,000, such as books, hand held tape recorders) and show the basis for computation. (Note: Organization's own capitalization policy may be used for items costing less than \$5,000). Generally, supplies include any materials that are expendable or consumed during the course of the project.

| <b>Supply Items</b>   | <b>Computation</b>          | <b>Cost</b>                 |
|---|-----------------------------|-----------------------------|
| <i>Office Supplies</i>  | <i>(\$50/mo. x 12 mo.)</i>  | <i>\$600</i>                |
| <i>Postage</i>  | <i>(\$20/mo. x 12 mo.)</i>  | <i>\$240</i>                |
| <i>Training Materials</i>   | <i>(\$2/set x 500 sets)</i> | <i>\$1,000</i>              |
| <i>Office supplies and postage are needed for general operation of the program. Training materials will be developed and used by the investigators to train patrol officers how to preserve crime scene evidence.</i> |                             |                             |
|   |                             | <b>TOTAL <u>\$1,840</u></b> |

**F. Construction** - As a rule, construction costs are not allowable. In some cases, minor repairs or renovations may be allowable. Check with the program office before budgeting funds in this category.

| <b>Purpose</b>   | <b>Description of Work</b>          | <b>Cost</b>                  |
|--|-------------------------------------|------------------------------|
| <i>Renovation</i>  | <i>Add walls</i>                    | <i>\$5,000</i>               |
|  | <i>Build work tables</i>            | <i>\$3,000</i>               |
|  | <i>Build evidence storage units</i> | <i>\$2,000</i>               |
| <i>The renovations are needed to upgrade the forensic lab used to analyze evidence for homicide cases.</i> |                                     |                              |
|  |                                     | <b>TOTAL <u>\$10,000</u></b> |

**G. Consultants/Contracts** - Indicate whether applicant's formal, written Procurement Policy or the Federal Acquisition Regulations are followed.

**Consultant Fees:** For each consultant enter the name, if known, service to be provided, hourly or daily fee (8-hour day), and estimated time on the project. Consultant fees in excess of \$450 per day require additional justification and prior approval from OJP.

| <b>Name of Consultant</b>  | <b>Service Provided</b>    | <b>Computation</b>           | <b>Cost</b>                    |
|--|----------------------------|------------------------------|--------------------------------|
| <i>John Doe</i>  | <i>Forensic Specialist</i> | <i>(\$150/day x 30 days)</i> | <i>\$4,500</i>                 |
| <i>John Doe, Forensic Specialist, will be hired, as needed, to assist with the analysis of evidence in homicide cases.</i> |                            |                              |                                |
|  |                            |                              | <i>Subtotal <u>\$4,500</u></i> |

**Consultant Expenses:** List all expenses to be paid from the grant to the individual consultants in addition to their fees (i.e., travel, meals, lodging, etc.)

| <b>Item</b>  | <b>Location</b> | <b>Computation</b>           | <b>Cost</b>                    |
|--|-----------------|------------------------------|--------------------------------|
| <i>Airfare</i>   | <i>Miami</i>    | <i>(\$400 x 6 trips)</i>     | <i>\$2,400</i>                 |
| <i>Hotel and Meals</i>   |                 | <i>(\$100/day x 30 days)</i> | <i>\$3,000</i>                 |
| <i>John Doe is expected to make up to 6 trips to Miami to consult on homicide cases.</i> |                 |                              |                                |
|  |                 |                              | <i>Subtotal <u>\$5,400</u></i> |

**Contracts:** Provide a description of the product or service to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100,000.

| <b>Item</b>   | <b>Cost</b>      |
|---|------------------|
| <i>Intelligence System Development</i>  | <i>\$102,000</i> |
| <i>The State University will design an intelligence system to be used in homicide investigations. A sole source justification is attached. Procurement Policy is based on the Federal Acquisition Regulation.</i> |                  |
| <i>Subtotal <u>\$102,000</u></i>  |                  |

**TOTAL \$111,900**

**H. Other Costs** - List items (e.g., rent, reproduction, telephone, janitorial or security services, and investigative or confidential funds) by major type and the basis of the computation. For example, provide the square footage and the cost per square foot for rent, or provide a monthly rental cost and how many months to rent.

| <b>Description</b>  | <b>Computation</b>   | <b>Cost</b>                  |
|---|--|------------------------------|
| <i>Rent</i>   | <i>(700 sq. ft. x \$15/sq. ft.)<br/>(\$875/mo. x 12 mo.)</i> | <i>\$10,500</i>              |
| <i>This rent will pay for space for the new homicide unit. No space is currently available in city-owned buildings.</i> |  |                              |
| <i>Telephone</i>  | <i>(\$100/mo. x 12 mo.)</i>                                  | <i>\$1,200</i>               |
| <i>Printing/Reproduction</i>  | <i>(\$150/mo. x 12 mo.)</i>                                  | <i>\$1,800</i>               |
|   |  | <b>TOTAL <u>\$13,500</u></b> |

SAMPLE

**I. Indirect Costs** - Indirect costs are allowed only if the applicant has a Federally approved indirect cost rate. A copy of the rate approval, (a fully executed, negotiated agreement), must be attached. If the applicant does not have an approved rate, one can be requested by contacting the applicant's cognizant Federal agency, which will review all documentation and approve a rate for the applicant organization, or if the applicant's accounting system permits, costs may be allocated in the direct costs categories.

| <b>Description</b>  | <b>Computation</b>       | <b>Cost</b>                  |
|---|--------------------------|------------------------------|
| <i>10% of personnel and fringe benefits</i>   | <i>(\$226,864 x 10%)</i> | <i>\$22,686</i>              |
| <i>The indirect cost rate was approved by the Department of Transportation, the applicant's cognizant Federal agency, on January 1, 1994. (A copy of the fully executed, negotiated agreement is attached.)</i> |                          |                              |
|   |                          | <b>TOTAL <u>\$22,686</u></b> |

**Budget Summary**- When you have completed the budget worksheet, transfer the totals for each category to the spaces below. Compute the total direct costs and the total project costs. Indicate the amount of Federal requested and the amount of non-Federal funds that will support the project.

| <b>Budget Category</b>          | <b>Amount</b>    |
|---------------------------------|------------------|
| <b>A. Personnel</b>             | <i>\$177,900</i> |
| <b>B. Fringe Benefits</b>       | <i>\$48,964</i>  |
| <b>C. Travel</b>                | <i>\$7,920</i>   |
| <b>D. Equipment</b>             | <i>\$7,000</i>   |
| <b>E. Supplies</b>              | <i>\$1,840</i>   |
| <b>F. Construction</b>          | <i>\$10,000</i>  |
| <b>G. Consultants/Contracts</b> | <i>\$111,900</i> |
| <b>H. Other</b>                 | <i>\$13,500</i>  |
| <b>Total Direct Costs</b>       | <i>\$379,024</i> |
| <b>I. Indirect Costs</b>        | <i>\$22,686</i>  |
| <b>TOTAL PROJECT COSTS</b>      | <i>\$401,710</i> |
| <b>Federal Request</b>          | <i>\$301,283</i> |
| <b>Non-Federal Amount</b>       | <i>\$100,427</i> |