

LCSW	Road Runner	30% fringe x salary x LOE	50%	\$6,750.00	\$20,250.00	\$27,000.00	Current organization fringe rate of 30% covers retirement, FICA, health insurance, and unemployment insurance
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
TOTAL C-2 Benefits				\$19,725.00	\$59,175.00	\$78,900.00	

C-3 TRAVEL & TRAINING

Mileage is paid at the state reimbursement rate of \$0.50 per mile.
Training hours for staff must be in C-1 Salaries.

Complete columns G and H.
They will auto-populate column I.

Item	Description	Initial Payment (Estimate of first three months)	Remaining Balance (Invoiced monthly starting at month 4)	Requested Contract Funds	Justification for Costs
Mileage	\$0.50 x 100/miles per month x 1 staff person (peer)	\$150.00	\$450.00	\$600.00	Transportation costs for peer service support throughout Delaware. All mileage will be recorded in a mileage log.
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
TOTAL C-3 Travel and Training		\$150.00	\$450.00	\$600.00	

C-4 OPERATIONAL

Utilities should be broken down as separate line items.

Complete columns G and H.
They will auto-populate column I.

Item	Description	Initial Payment (Estimate of first three months)	Remaining Balance (Invoiced monthly starting at month 4)	Requested Contract Funds	Justification for Costs
Rent	25% proportional share of existing rental space (total cost is \$1000/mo)	\$750.00	\$2,250.00	\$3,000.00	Use of shared space for project
Phone	25% proportional share of business lines (total cost is \$100/mo)	\$75.00	\$225.00	\$300.00	Shared use of business line needed to provide services to support this project
Zoom	Annual dedicated Zoom subscription for dedicated project use (one-time cost)	\$300.00	\$0.00	\$300.00	Subscription required for effective program operations, including systems that support treatment, client follow-ups, and team planning.
Laptop	Laptop for new peer support specialist (one-time cost)	\$1,000.00	\$0.00	\$1,000.00	For use by peer support specialist to support project activities and client communication
Licensing fees	Malware and security licensing for laptop	\$150.00	\$0.00	\$150.00	Required licensing for laptop for peer support specialist
				\$0.00	
				\$0.00	
				\$0.00	
TOTAL C-4 Operational		\$2,275.00	\$2,475.00	\$4,750.00	

C-5 CONTRACTUAL

e.g., Hired staff not on payroll, leased equipment, EHR vendor, etc.

Complete columns G and H.
They will auto-populate column I.

Name of Organization/Consultant	Description	Initial Payment (Estimate of first three months)	Remaining Balance (Invoiced monthly starting at month 4)	Requested Contract Funds	Justification for Costs
XYZ Translation Services	Translation services (Total Annual contract = \$12,000) - 25% proportional cost	\$750.00	\$2,250.00	\$3,000.00	Translation services ensure that our programs and materials are accessible to non-English speaking clients
Bugs Bunny	Peer Support Specialist \$25/hour for 10 hours per week for 10 months	\$2,500.00	\$7,500.00	\$10,000.00	Coordination of program activities with clients
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
TOTAL C-5 Contractual		\$3,250.00	\$9,750.00	\$13,000.00	

C-6 SUPPLIES

Complete columns G and H.
They will auto-populate column I.

Item	Description	Initial Payment (Estimate of first three months)	Remaining Balance (Invoiced monthly starting at month 4)	Requested Contract Funds	Justification for Costs
iPads	2 iPads x \$599 each	\$1,198.00	\$0.00	\$1,198.00	Up front purchase of ipads to support screening and client management
Printer	20% proportional share of new printer (\$699)	\$139.80	\$0.00	\$139.80	Up front purchase of printer to be used for printing referral information and relevant educational materials
Office supplies	Printer paper, folders, pens (estimated at \$40/month)	\$120.00	\$360.00	\$480.00	Supplies needed for project operations
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
TOTAL C-6 Supplies		\$1,457.80	\$360.00	\$1,817.80	

C-7 EQUIPMENT

ONLY singular, machine-type items \$10,000 or more should be listed in this section.

Complete columns G and H.
They will auto-populate column I.

Item	Description	Initial Payment (Estimate of first three months)	Remaining Balance (Invoiced monthly starting at month 4)	Requested Contract Funds	Justification for Costs
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
TOTAL C-7 Equipment		\$0.00	\$0.00	\$0.00	

C-8 INDIRECT COST

Cannot be more than 15% of total direct costs; maximum is \$39,130.43

Complete columns G and H.
They will auto-populate column I.

See Guide Tab at bottom for instructions

Item	Description	Initial Payment (Estimate of first three months)	Remaining Balance (Invoiced monthly starting at month 4)	Requested Contract Funds	Justification for Costs
Indirect Cost	Indirect costs calculated at <15% of total direct costs	\$8,374.00	\$25,123.00	\$33,497.00	These costs are associated with overhead administration such as HR, IT, audit, payroll, etc.
TOTAL C-8 Indirect		\$8,374.00	\$25,123.00	\$33,497.00	

Total Budget	Initial Payment (Estimate of first three months)	Remaining Balance (Invoiced monthly starting at month 4)	Requested Contract Funds
	\$55,940.13	\$200,874.67	\$256,814.80

COST-REIMBURSEMENT CONTRACT BUDGET OVERVIEW

Budget Category	Requested Contract Funds
C-1 SALARIES	\$124,250.00
C-2 BENEFITS	\$78,900.00
C-3 TRAVEL AND TRAINING	\$600.00
C-4 OPERATIONAL	\$4,750.00
C-5 CONTRACTUAL	\$13,000.00
C-6 SUPPLIES	\$1,817.80
C-7 EQUIPMENT	\$0.00
TOTAL DIRECT COST	\$223,317.80
C-8 INDIRECT COST	\$33,497.00
TOTAL CONTRACT COST	\$256,814.80