BUDGET FORM - PAGE ONE

a. Legal Name (5a from Face	Sheet): _									
b. Requested Grant Period From: Requested Grant Period Through:										
c. If this is a revised budget, in	ndicate a	application	n/gran	t number:						
Section A: Detailed Budge	t									
	c. Through:									
d. 10di. 12 22 02 12	0. 200	Bot 2 oto	<u> </u>	-						
1. Salaries and Wages										
Name/Title of Position	No.	Method of Cost Computation			\$ Grant Funds	\$ Cost Sharing	\$ Total			
	1					1	1			
	<u> </u>	<u> </u>			<u> </u>	<u> </u>	1			
	<u> </u>	1								
		<u> </u>				<u> </u>				
				SUBTOTALS						
2. Fringe Benefits										
zi i iii.go zononto	Rate			\$ Salary Base	\$ Grant Funds	\$ Cost Sharing	\$ Total			
			% of							
			% of							
			% of							
				SUBTOTALS						
3. Consultant Fees	N. C									
Name or Type of Consultant	No. of or Type of Consultant days Daily Rate of Com			pensation	\$ Grant Funds	\$ Cost Sharing	\$ Total			
				SURTOTALS						

BUDGET FORM - PAGE TWO

4. Travel \$ Transportation \$ Subsistence No. of No. of Costs Costs \$ Grant Funds \$ Cost Sharing \$ Total From/To persons days SUBTOTALS 5. Supplies and Materials Basis/Method of Cost Computation \$ Grant Funds \$ Cost Sharing \$ Total SUBTOTALS 6. Services Basis/Method of Cost Computation \$ Grant Funds \$ Cost Sharing \$ Total Item SUBTOTALS

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7. Stude	ent Support (Laura Bush	21st Century Librar	ians Program	only)						
Item		Basis/Method of Cos	t Computation	\$ Grant Funds	\$ Cost Sharing	\$ Total				
			SUBTOTA	us		1				
8. Othe	= Coote		- -		I					
	r Costs	Basis/Method of Cos	+ Computation	\$ Grant Funds	\$ Cost Sharing	\$ Total				
Item		Basis/ Metriou or Cos	3 Grant Funds	4 COSt Sharing	\$ 10tai					
		<u> </u>				1 7				
				<u> </u>		<u> </u>				
				<u>_</u>		1				
						<u> </u>				
			SUBTOTA	ils						
9. Total	Direct Costs			,						
		TOTALS (Add subto	tale of items 1 to	\$ Grant Funds	\$ Cost Sharing	\$ Total				
		TOTALO (Aud Subto	tais or items = to	0)						
10. Indi	irect Costs									
	ne instructions about Indir the information requeste		mpleting this s	section. Check t	he appropriate bo	ox below and				
a fe agei	Current indirect cost rate(s) have been negotiated with a federal agency (for item A, indicate the name of the agency and date of agreement expiration; complete item B). Applicant chooses a rate not to exceed 15% of direct costs (complete item B).									
age	rect cost proposal has been ncy but not yet negotiated (f ne agency and date of proposa	or item A, indicate the r								
Item A:	Name of federal agenc	y:								
	Expiration Date:		Propo	sal Date:						
Item B:	R	ate	\$ Base	\$ Grant Funds	\$ Cost Sharing	\$ Total				
Ilem D.		% of								
		% of								
		% of	- -							
		_	SUBTOTA	LS						
11 . Tota	al Project Costs									
	PPO IFCT COST TO	TALS (Direct and Indirec	\$ Grant Funds	\$ Cost Sharing	\$ Total					
		T COST TOTALS (Excluding		<u> </u>	<u> </u>					