

Instructions for the Local Food Promotion Program (LFPP) Budget and Match Request Form

LFPP provides the following guidance to organize and complete the LFPP Project Budget and Match Request Form.

NOTE: LFPP grant funds cannot be used to pay for the purchase, repair, rehabilitation, or construction of a building or structure; acquisition of land; political or lobbying activities; or any activities prohibited by 7 CFR parts 3015 and 3019. For additional information on allowable and unallowable costs, refer to the "LFPP Announcement and Guidelines."

In order to expedite the application review process, follow these steps to complete the "Budget Summary" worksheet form:

Organization Contact Info. Enter the: Project Title, Organization, Contact Person, Contact Phone and Contact Email.

Budget Summary Itemization **All Budget Items Must:**

- Be itemized within the budget categories, listing each item, its cost, and use
- Include all matching funds as line items per instructions below

Do not input matching funds on the "Budget Summary" worksheet. Use the "Matching Funds" worksheets - the items will transfer to the "Budget Summary" worksheet automatically.

If necessary, please add additional rows under each budget category to fully identify all budget items.

- Personnel/Contractor**
- Show hourly rates and estimated number of hours or annual salary and percentage of time to be spent on the project by each project participant.
 - For contractors, list the general categories of services the contract covers (e.g., type of professional services, travel, lodging, administrative expenses, etc.).

Equipment Indicate anticipated purchases of equipment. List separately each item of equipment, its cost and use. *Equipment* means any tangible, nonexpendable, personal property, including exempt property charged directly to the grant having: (1) a useful life of more than 1 year, and (2) an acquisition cost of \$5,000 or more per unit (7 CFR 3016.3 and 7 CFR 3019.2).

Travel Indicate the details and purpose of each trip and the anticipated travel expenses.

- For personal car, mileage is reimbursable at the current General Services Administration's privately owned vehicle (POV) rate.

Supplies Provide an estimate of supply expenditures. List each supply category separately, its cost and use. *Supplies* means any tangible personal property other than equipment (as defined above), excluding debt instruments and inventions (defined in 7 CFR 3019.2(hh)).

Other Provide, in sufficient detail, an itemized list of projected expenditures, their cost and use. *Other items* mean any item not fitting into the personnel, contractual, equipment, travel, and supplies categories explained above (e.g., rentals, survey respondent incentives).

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Indirect Costs Indirect costs may not exceed 10 percent of the Direct costs.

Provide in sufficient detail what the indirect costs will cover. Indirect costs do not need to be itemized, but indirect costs will NOT be approved without some detail of what the costs will cover.

Indirect costs may be listed under "Requested Federal Funds" and/or "Matching Contributions."

To calculate the allowed 10%, use the following formula:

- **Formula:** Projected Direct Costs (\$) multiplied by Maximum Indirect Costs Allowed (%) = Highest Possible Indirect Costs

Example: \$120,000 multiplied by 10% = \$12,000

Using this formula and based on this example, an applicant who has \$120,000 in direct costs could have up to \$12,000 in indirect costs as either "Requested Federal Funds" or "Matching Contributions."

Follow these steps to complete the "Matching Funds" worksheets:

Matching Funds

- Matching funds are required in the form of cash or in-kind contribution in an amount equal to 25 percent of the total cost of the project
- All matching funds require a line item. Include all matching fund contributions from the applicant and/or third parties in the "Matching Funds" worksheet. If necessary, additional columns can be added to fully identify all parties providing matching fund contributions.

To calculate the required 25% match, use the following formula:

- **Formula (step 1):** Requested Federal Funds (\$) divided by Federal Share (%) = Total Project Cost

Example: \$100,000 divided by 75% = \$133,333

- **Formula (step 2):** Total Project Cost (\$) minus Requested Federal Funds (\$) = Applicant Match

Example: \$133,333 minus 100,000 = \$33,333

Using this formula and based on this example, an applicant requesting \$100,000 in LFPP funds will be required to provide matching funds in the amount of \$33,333, which is 25 percent of the total cost of the project.

After completing this form, save a copy and print for your records, then upload this file, along with all other application materials, in the Grants.gov application package.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-0287. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable sex, marital status, or familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program (not all prohibited bases apply to all programs). Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

**Local Food Promotion Program (LFPP)
Budget and Match Request Form**

Local Food Promotion Program (LFPP) Budget and Match Request Form

Project Title:
Organization:
Contact Person:
Contact Phone:
Contact Email:

LFPP 2014

Budget Summary Itemization:	Requested Federal Funds	Requested Federal Funds	Matching Contribution	Matching Contribution	Budget	LFPP 2014
	Year 1	Year 2	Year 1	Year 2	Totals	This Column for LFPP Staff Revised/ Approved
Personnel:						
Total Personnel	\$0	\$0	\$0	\$0	\$0	
Contractual:						
Total Contractual	\$0	\$0	\$0	\$0	\$0	
Travel:						
Total Travel	\$0	\$0	\$0	\$0	\$0	
Equipment:						
Total Equipment	\$0	\$0	\$0	\$0	\$0	
Supplies:						
Total Supplies	\$0	\$0	\$0	\$0	\$0	
Other:						
Total Other	\$0	\$0	\$0	\$0	\$0	
Total Direct Costs	\$0	\$0	\$0	\$0	\$0	
Indirect Costs:						
Total Indirect	\$0	\$0	\$0	\$0	\$0	
Total Federal Request:	\$0	\$0				
Total Matching Contribution:			\$0	\$0		
Total Project Costs:					\$0	
10% of Direct Costs Check:						#DIV/0!
25% Match Check:						#DIV/0!

Local Food Promotion Program (LFPP) Budget and Match Request Form - Year 1

Project Title:
 Organization:
 Contact Person:
 Contact Phone:
 Contact Email:

LFPP 2014

Budget Summary Itemization:		Matching Contribution Applicant	Matching Contribution Other 1	Matching Contribution Other 2	Matching Contribution Totals
Personnel:					\$0
					\$0
					\$0
					\$0
	Total Personnel	\$0	\$0	\$0	\$0
Contractual:					\$0
					\$0
					\$0
					\$0
	Total Contractual	\$0	\$0	\$0	\$0
Travel:					\$0
					\$0
					\$0
					\$0
	Total Travel	\$0	\$0	\$0	\$0
Equipment:					\$0
					\$0
					\$0
					\$0
	Total Equipment	\$0	\$0	\$0	\$0
Supplies:					\$0
					\$0
					\$0
					\$0
	Total Supplies	\$0	\$0	\$0	\$0
Other:					\$0
					\$0
					\$0
					\$0
	Total Other	\$0	\$0	\$0	\$0
Indirect Costs:					\$0
	Total Indirect	\$0	\$0	\$0	\$0

Local Food Promotion Program (LFPP) Budget and Match Request Form - Year 2

Project Title:
 Organization:
 Contact Person:
 Contact Phone:
 Contact Email:

LFPP 2014

Budget Summary Itemization:		Matching Contribution Applicant	Matching Contribution Other 1	Matching Contribution Other 2	Matching Contribution Totals
Personnel:					\$0
					\$0
					\$0
					\$0
	Total Personnel	\$0	\$0	\$0	\$0
Contractual:					\$0
					\$0
					\$0
					\$0
	Total Contractual	\$0	\$0	\$0	\$0
Travel:					\$0
					\$0
					\$0
					\$0
	Total Travel	\$0	\$0	\$0	\$0
Equipment:					\$0
					\$0
					\$0
					\$0
	Total Equipment	\$0	\$0	\$0	\$0
Supplies:					\$0
					\$0
					\$0
					\$0
	Total Supplies	\$0	\$0	\$0	\$0
Other:					\$0
					\$0
					\$0
					\$0
	Total Other	\$0	\$0	\$0	\$0
Indirect Costs:					\$0
	Total Indirect	\$0	\$0	\$0	\$0