

1305 Year 2 Budget (PPHF)

Form Approved
OMB No. 0920-XXXX
Exp. Date XX/XX/XXXX

State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health

<Enter State Name>

Workbook Contents



Instructions

Purpose of the Template

The purpose of this template is to:
Perform calculations automatically to reduce burden on states
Enable improved evaluation capabilities by NCCDPHP
Promote fiscal accountability and foster increased communication
Provide CDC with an opportunity to document how funds are being invested to improve capacity of state health departments

Abbreviations

HDSP = Heart Disease and Stroke Prevention
NPAO = Nutrition, Physical Activity, and Obesity
SH = School Health

Technical Support

If you need technical support when using this template, email 1305BudgetWorkPlan@cdc.gov and CC your lead project officer.

Public reporting of this collection of information varies from 1 to 9 hours 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. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN:PRA (0920-XXXX).

Personnel Salary and Fringe

Personnel Cost									
Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
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Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
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Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
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Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)				

Personnel Cost

Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)				

Personnel Cost

Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				

Personnel Salary and Fringe

Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	

Personnel Cost

Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)				

Personnel Cost

Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				

Personnel Salary and Fringe

Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	

Personnel Cost									
Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)				

Personnel Cost									
Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)				

Personnel Salary and Fringe

Personnel Cost									
Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)				

Personnel Cost									
Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)				

Personnel Cost

Personnel Salary and Fringe

Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)				

Personnel Cost									
Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)				

Personnel Cost									
Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			

Personnel Salary and Fringe

Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	
Domain						
Basic Activities	0.0%			0.0%	0.0% (\$0)	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	

Personnel Cost									
Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)				
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)				

Personnel Cost									
Name	Position Title	Annual Salary and Wages	% Paid by This Grant	Months	Salary and Wages	Fringe (%)	Fringe (\$) if not %	Fringe	Total Planned
					\$ -			\$ -	\$ -
Allocation of Cost by Domain and Funding Category						Justification			
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total				
Domain									
Basic Activities	0.0%			0.0%	0.0% (\$0)				

Personnel Salary and Fringe

Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
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Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification	
Name of Contractor						Salary and Wages	\$ -		
Method of Selection						Fringe Benefits	\$ -		
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -		
Period of Performance						Equipment	\$ -		
Scope of Work						Supplies	\$ -		
						Travel	\$ -		
Method of Accountability						Deliverable Cost	<enter description> \$ -		
						Other	<enter description> \$ -		
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -		
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -		
Basic Activities	0.0%				0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -		
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate			
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -		
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -		

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
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Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
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Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
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						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
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Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
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Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
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						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
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Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
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Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
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Scope of Work						Supplies	\$ -	
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Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
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Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
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Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification	
Name of Contractor						Salary and Wages	\$ -		
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Basic Activities	0.0%				0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
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Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -		
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -		

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
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Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
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Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs			Justification	
Name of Contractor						Salary and Wages	\$	-		
Method of Selection						Fringe Benefits	\$	-		
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$	-		
Period of Performance						Equipment	\$	-		
Scope of Work						Supplies	\$	-		
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Method of Accountability						Deliverable Cost	<enter description>	\$	-	
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Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%				0.0%	0.0% (\$0)	Subcontract Costs	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$	-		
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate				
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$	-		
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$	-		

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
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Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
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Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Contracts

Basic Information						Itemized Costs		Justification
Name of Contractor						Salary and Wages	\$ -	
Method of Selection						Fringe Benefits	\$ -	
Justification for Sole Source Selection (if applicable)						Consultant Costs	\$ -	
Period of Performance						Equipment	\$ -	
Scope of Work						Supplies	\$ -	
						Travel	\$ -	
Method of Accountability						Deliverable Cost	<enter description> \$ -	
						Other	<enter description> \$ -	
Allocation of Cost by Domain and Funding Category						Other	<enter description> \$ -	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description> \$ -	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Subcontract Costs	\$ -	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL DIRECT COSTS	\$ -	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Indirect Rate		
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	TOTAL INDIRECT COSTS	\$ -	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONTRACT	\$ -	

Consultants

Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category \ Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
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Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
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Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
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Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category \ Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category / Domain	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Consultants										
Basic Information						Itemized Costs			Justification	
Name of Consultant						Number of Days of Consultation				
Organizational Affiliation						Expected Daily Rate of Compensation	\$	-		
Nature of Services to Be Rendered						BASE COMPENSATION SUBTOTAL	\$	-		
						Travel	\$	-		
Relevance of Service to the Project						Per Diem (total for all days consultation)	\$	-		
						Supplies	\$	-		
Method of Accountability						Deliverable Cost	<enter description>	\$	-	
Allocation of Cost by Domain and Funding Category						Other	<enter description>	\$	-	
Funding Category	HDSP	Diabetes	NPAO	SH	Domain Total	Other	<enter description>	\$	-	
Domain						Other	<enter description>	\$	-	
Basic Activities	0.0%			0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 2 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 3 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	Other	<enter description>	\$	-	
Domain 4 Activities	0.0%	0.0%	0.0%	0.0%	0.0% (\$0)	EXPENSES SUBTOTAL		\$	-	
Funding Category Total	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	0.0% (\$0)	TOTAL FOR CONSULTANT		\$	-	

Basic Funding
BUDGET FOR BASIC

	Planned Budget	Obligated to Date	Expended to Date	Unobligated Balance
Salary and Wages	\$ -			\$ -
Fringe Benefits	\$ -			\$ -
Consultant Costs	\$ -			\$ -
Equipment	\$ -			\$ -
Supplies	\$ -			\$ -
Travel	\$ -			\$ -
Other	\$ -			\$ -
Contractual Costs	\$ -			\$ -
Total Direct Costs	\$ -	\$ -	\$ -	\$ -
Indirect Costs				
TOTAL	\$ -	\$ -	\$ -	\$ -
TARGET	\$ -			
DIFFERENCE (should be zero)	\$ -			

Description of Indirect Cost Calculations (also applies to enhanced domains)

Personnel Salary and Fringe		
Total Salary and Wages Planned	Total Fringe Planned	
TOTAL: \$ -	\$ -	

Consultant Costs	
Total Amount Planned	
TOTAL: \$ -	

Contractual Costs	
Total Amount Planned	
TOTAL: \$ -	

Equipment				
In most cases, awardees may not use funds from this grant for the purchase of furniture or equipment. Select "Yes" at right if you plan to purchase equipment.				
Item Requested	Number Needed	Unit Cost	Amount Planned	Justification
			\$ -	Select
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	

Domain 3: Health System Interventions
BUDGET FOR DOMAIN 3

Funding Category	Planned Budget		Obligated to Date		Expended to Date		Unobligated Balance	
	HDSP	Diabetes	HDSP	Diabetes	HDSP	Diabetes	HDSP	Diabetes
Salary and Wages	\$ -	\$ -					\$ -	\$ -
Fringe Benefits	\$ -	\$ -					\$ -	\$ -
Consultant Costs	\$ -	\$ -					\$ -	\$ -
Equipment	\$ -	\$ -					\$ -	\$ -
Supplies	\$ -	\$ -					\$ -	\$ -
Travel	\$ -	\$ -					\$ -	\$ -
Other	\$ -	\$ -					\$ -	\$ -
Contractual Costs	\$ -	\$ -					\$ -	\$ -
Total Direct Costs	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Indirect Costs							\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TARGET	\$ -	\$ -						
DIFFERENCE (should be zero)	\$ -	\$ -						

Personnel Salary and Fringe						
Total Salary and Wages Planned	Salary and Wages funded by HDSP	Salary and Wages funded by Diabetes	Total Fringe Planned	Fringe funded by HDSP	Fringe funded by Diabetes	
TOTAL:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Consultant Costs			
Total Amount Planned	Amount funded by HDSP	Amount funded by Diabetes	
TOTAL:	\$ -	\$ -	\$ -

Contractual Costs			
Total Amount Planned	Amount funded by HDSP	Amount funded by Diabetes	
TOTAL:	\$ -	\$ -	\$ -

Equipment								
In most cases, awardees may not use funds from this grant for the purchase of furniture or equipment. Select "Yes" at right if you plan to purchase equipment.								Select
Item Requested	Number Needed	Unit Cost	Amount Planned	% allocated to HDSP activities	Amount funded by HDSP	% allocated to Diabetes activities	Amount funded by Diabetes	Justification
			\$ -		\$ -		\$ -	
			\$ -		\$ -		\$ -	
			\$ -		\$ -		\$ -	
			\$ -		\$ -		\$ -	
			\$ -		\$ -		\$ -	
			\$ -		\$ -		\$ -	
			\$ -		\$ -		\$ -	
			\$ -		\$ -		\$ -	
			\$ -		\$ -		\$ -	

BUDGET FOR DOMAIN 3						
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
			\$ -		\$ -	\$ -
TOTAL:			\$ -		\$ -	\$ -

Supplies									
Item Requested	Type (if appropriate)	Number Needed	Unit Cost	Amount Planned	% allocated to HDSP activities	Amount funded by HDSP	% allocated to Diabetes activities	Amount funded by Diabetes	Justification
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -	
TOTAL:				\$ -		\$ -		\$ -	

Travel										
Description and Number of People	Cost of Airfare or Mileage	Cost of Per Diem or Lodging	Cost of Ground Transportation	Other Costs	Total Amount Planned	% allocated to HDSP activities	Amount funded by HDSP	% allocated to Diabetes activities	Amount funded by Diabetes	Justification
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -	

BUDGET FOR DOMAIN 4

Supplies											
Item Requested	Type (if appropriate)	Number Needed	Unit Cost	Amount Planned	% allocated to HDSP activities	Amount funded by HDSP	% allocated to Diabetes activities	Amount funded by Diabetes	% allocated to SH activities	Amount funded by SH	Justification
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
				\$ -		\$ -		\$ -		\$ -	
TOTAL:				\$ -		\$ -		\$ -		\$ -	

Travel												
Description and Number of People	Cost of Airfare or Mileage	Cost of Per Diem or Lodging	Cost of Ground Transportation	Other Costs	Total Amount Planned	% allocated to HDSP activities	Amount funded by HDSP	% allocated to Diabetes activities	Amount funded by Diabetes	% allocated to SH activities	Amount funded by SH	Justification
					\$ -		\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -		\$ -	
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					\$ -		\$ -		\$ -		\$ -	
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					\$ -		\$ -		\$ -		\$ -	
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					\$ -		\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -		\$ -	
					\$ -		\$ -		\$ -		\$ -	
TOTAL:		\$ -	\$ -	\$ -	\$ -		\$ -		\$ -		\$ -	

Other											
Item Requested	Number Needed	Unit Cost	Amount Planned	% allocated to HDSP activities	Amount funded by HDSP	% allocated to Diabetes activities	Amount funded by Diabetes	% allocated to SH activities	Amount funded by SH	Justification	
			\$ -		\$ -		\$ -		\$ -		
			\$ -		\$ -		\$ -		\$ -		
			\$ -		\$ -		\$ -		\$ -		
			\$ -		\$ -		\$ -		\$ -		
			\$ -		\$ -		\$ -		\$ -		
			\$ -		\$ -		\$ -		\$ -		

Budget Reports

PPHF Budget

Target versus Planned Budget by Domain and Funding Category

	Funding Category	Heart Disease and Stroke Prevention	Diabetes	Nutrition, Physical Activity, and Obesity	School Health	TOTAL
Target Funding	Basic	\$ -	\$ -	\$ -	\$ -	\$ -
	Enhanced	\$ -	\$ -	\$ -	\$ -	\$ -
	Domain 2	\$ -	\$ -	\$ -	\$ -	\$ -
	Domain 3	\$ -	\$ -	\$ -	\$ -	\$ -
	Domain 4	\$ -	\$ -	\$ -	\$ -	\$ -
	TOTAL TARGET	\$ -	\$ -	\$ -	\$ -	\$ -
Planned Budget	Basic	\$ -	\$ -	\$ -	\$ -	\$ -
	Enhanced	\$ -	\$ -	\$ -	\$ -	\$ -
	Domain 2	\$ -	\$ -	\$ -	\$ -	\$ -
	Domain 3	\$ -	\$ -	\$ -	\$ -	\$ -
	Domain 4	\$ -	\$ -	\$ -	\$ -	\$ -
	TOTAL PLANNED	\$ -	\$ -	\$ -	\$ -	\$ -
Balance (Not Yet Planned)	Basic	\$ -	\$ -	\$ -	\$ -	\$ -
	Enhanced	\$ -	\$ -	\$ -	\$ -	\$ -
	Domain 2	\$ -	\$ -	\$ -	\$ -	\$ -
	Domain 3	\$ -	\$ -	\$ -	\$ -	\$ -
	Domain 4	\$ -	\$ -	\$ -	\$ -	\$ -
	NET BALANCE	\$ -	\$ -	\$ -	\$ -	\$ -

Budget Reports
PPHF Budget
Planned Budget by Object Class and Funding Category

Basic Component

Funding Category					
Object Class	HDSP	Diabetes	NPAO	SH	TOTAL
Salary and Wages	\$ -	\$ -	\$ -	\$ -	\$ -
Fringe Benefits	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant Costs	\$ -	\$ -	\$ -	\$ -	\$ -
Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
Supplies	\$ -	\$ -	\$ -	\$ -	\$ -
Travel	\$ -	\$ -	\$ -	\$ -	\$ -
Other	\$ -	\$ -	\$ -	\$ -	\$ -
Contractual Costs	\$ -	\$ -	\$ -	\$ -	\$ -
Indirect Costs	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -

Enhanced Component

Funding Category					
Object Class	HDSP	Diabetes	NPAO	SH	TOTAL
Salary and Wages	\$ -	\$ -	\$ -	\$ -	\$ -
Fringe Benefits	\$ -	\$ -	\$ -	\$ -	\$ -
Consultant Costs	\$ -	\$ -	\$ -	\$ -	\$ -
Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
Supplies	\$ -	\$ -	\$ -	\$ -	\$ -
Travel	\$ -	\$ -	\$ -	\$ -	\$ -
Other	\$ -	\$ -	\$ -	\$ -	\$ -
Contractual Costs	\$ -	\$ -	\$ -	\$ -	\$ -
Indirect Costs	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -

Form 424A, Section B
PPHF Funding

Object Class Categories	Funding Category			TOTAL Enhanced (sum of C-F)	TOTAL Award (Basic & Enhanced) (sum of B and G)
	Basic (HDSP, Diabetes, NPAO)	Enhanced Heart Disease & Stroke Prev	Enhanced Diabetes		
a. Personnel	\$ -	\$ -	\$ -	\$ -	\$ -
b. Fringe Benefits	\$ -	\$ -	\$ -	\$ -	\$ -
c. Travel	\$ -	\$ -	\$ -	\$ -	\$ -
d. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
e. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -
f. Contractual	\$ -	\$ -	\$ -	\$ -	\$ -
g. Construction	\$ -	\$ -	\$ -	\$ -	\$ -
h. Other	\$ -	\$ -	\$ -	\$ -	\$ -
i. Total Direct Charges (sum of a-h)	\$ -	\$ -	\$ -	\$ -	\$ -
j. Indirect Charges	\$ -	\$ -	\$ -	\$ -	\$ -
k. TOTALS (sum of i and j)	\$ -	\$ -	\$ -	\$ -	\$ -

Form 424A, Section B
Non-PPHF Funding

Object Class Categories	Funding Category					TOTAL Enhanced (sum of C-F)	TOTAL Award (Basic & Enhanced) (sum of B and G)
	Non-PPHF Funding	Non-PPHF Funding	Non-PPHF Funding	Non-PPHF Funding	Non-PPHF Funding		
	Basic (SH)	Enhanced Heart Disease & Stroke Prev	Enhanced Diabetes	Enhanced School Health	Enhanced Nutrition, PA & Obesity		
a. Personnel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b. Fringe Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
c. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
e. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
f. Contractual	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
g. Construction	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
h. Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
i. Total Direct Charges (sum of a-h)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
j. Indirect Charges	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
k. TOTALS (sum of i and j)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

In-Kind Funding (Optional)

Total non-Federal Funds (if not using table below)

Estimated In-Kind Funding						
Object Class	Applicant Funds	State Funds	Local Funds	Other	Program Income	TOTAL
Salary and Wages						\$ -
Fringe Benefits						\$ -
Consultant Costs						\$ -
Equipment						\$ -
Supplies						\$ -
Travel						\$ -
Other						\$ -
Contractual Costs						\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

You may use the space below to provide additional detail on in-kind and matching funds provided.