

U.S. DEPARTMENT OF THE INTERIOR
Office of Surface Mining Reclamation and Enforcement

OMB Control No. 1029-0059
Exp. Date: 7/31/2015

*****Dwf i gv'kphgt o cvkqp Tgr qt v

*****IO RQT VCP V<'Rgcug't gcf 'lpwt vevkpu'qp'vj g't gxgt ug'qhl'vj lu't ci g'fghgt g'eqo r rgvpi 'vj lu'ht o 0							
A. Program			E. Budget Period (Month, Day, Year)			F. Mark 'X' in Appropriate Box	
B. Grantee			Beginning Date			() New Budget	
C. Grant Program			Ending Date			() Revised Budget (Enter Grant Number)	
D. Rate of Federal Sharing (%)						() Grant Number	
*****RTQI TCO HWPEVKQPUCEVKKWGU							TOTAL (g)
	(a)	(b)	(c)	(d)	(e)	(f)	
	1. Personnel						
	2. Fringe Benefit						
Ugevkp'C	3. Travel						
U{	4. Equipment						
QdlgevErcu	5. Supplies						
	6. Contractual						
	7. Construction						
	8. Other						
	9. Total Direct Charges						
	10. Indirect Charges						
	330Vqel						
Ugevkp'D*****	12. Non-Federal Share						
U{	13. Federal Share						
Uqvt eg							
Ugevkp'E							
U{	14. Program Income						
Upeo g							
Ugevkp'F	15. Detail on Indirect Cost () Predetermined () Provisional () Final () Fixed						
Uf lt gev''	Type of Rate (mark 'X' in Box)	Total Amount _____	Base _____				
E quv	Rate %						
E. Signature of Authorizing Official		F. Name and Title (type or print)		G. Telephone Number (Area Code, Number and Extension)		H. Date Report Submitted	