

**BUREAU OF LABOR STATISTICS  
BUDGET INFORMATION FORM**

**U.S. DEPARTMENT OF LABOR**



See complete instructions in LMI Cooperative Agreement, Part II, Application Instructions.

We estimate that it will take an average of 3.5 hours to complete this form including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information. Your response is required to obtain or retain benefits under 29 USC 49L-1. If you have any comments on the estimates or the form, send them to BLS, Division of Financial Planning and Management (1220-0079), 2 Massachusetts Avenue, NE, Room 4135, Washington, DC 20212-0001. You are not required to respond to the collection of information unless it displays a currently valid OMB control number.

OMB No. 1220-0079  
Approval Expires xx-xx-xxxx

|                     |                               |                     |
|---------------------|-------------------------------|---------------------|
| State Abbreviation: | Name of Submitting Official:  | Page _____ of _____ |
| CA No.:             | Title of Submitting Official: | Phone:              |
| Fiscal Year:        | CA Duration:                  | Date Completed:     |

| Col. A | Col. B                    | Col. C        |         | Col. D         |         | Col. E        |         | Col. F         |         | Col. G   |         |
|--------|---------------------------|---------------|---------|----------------|---------|---------------|---------|----------------|---------|--|---------|
| Line   | Program and Cost Category | FIRST QUARTER |         | SECOND QUARTER |         | THIRD QUARTER |         | FOURTH QUARTER |         | TOTAL: <input type="checkbox"/> FY <input type="checkbox"/> AAMC |         |
| Number |                           | Staff years   | Dollars | Staff years    | Dollars | Staff years   | Dollars | Staff years    | Dollars | Staff years  | Dollars |

|                 |                      |             |  |                        |  |  |  |  |  |  |  |
|-----------------|----------------------|-------------|--|------------------------|--|--|--|--|--|--|--|
| <b>Program:</b> |                      | <b>FLC:</b> |  | <b>Activity Title:</b> |  |  |  |  |  |  |  |
| 1               | Program Staff        |             |  |                        |  |  |  |  |  |  |  |
| 2               | AS & T Staff         |             |  |                        |  |  |  |  |  |  |  |
| 3               | Nonpersonal Services |             |  |                        |  |  |  |  |  |  |  |
| 4               | Total Resources      |             |  |                        |  |  |  |  |  |  |  |

|                 |                      |             |  |                        |  |  |  |  |  |  |  |
|-----------------|----------------------|-------------|--|------------------------|--|--|--|--|--|--|--|
| <b>Program:</b> |                      | <b>FLC:</b> |  | <b>Activity Title:</b> |  |  |  |  |  |  |  |
| 5               | Program Staff        |             |  |                        |  |  |  |  |  |  |  |
| 6               | AS & T Staff         |             |  |                        |  |  |  |  |  |  |  |
| 7               | Nonpersonal Services |             |  |                        |  |  |  |  |  |  |  |
| 8               | Total Resources      |             |  |                        |  |  |  |  |  |  |  |

|                 |                      |             |  |                        |  |  |  |  |  |  |  |
|-----------------|----------------------|-------------|--|------------------------|--|--|--|--|--|--|--|
| <b>Program:</b> |                      | <b>FLC:</b> |  | <b>Activity Title:</b> |  |  |  |  |  |  |  |
| 9               | Program Staff        |             |  |                        |  |  |  |  |  |  |  |
| 10              | AS & T Staff         |             |  |                        |  |  |  |  |  |  |  |
| 11              | Nonpersonal Services |             |  |                        |  |  |  |  |  |  |  |
| 12              | Total Resources      |             |  |                        |  |  |  |  |  |  |  |

|                 |                      |             |  |                        |  |  |  |  |  |  |  |
|-----------------|----------------------|-------------|--|------------------------|--|--|--|--|--|--|--|
| <b>Program:</b> |                      | <b>FLC:</b> |  | <b>Activity Title:</b> |  |  |  |  |  |  |  |
| 13              | Program Staff        |             |  |                        |  |  |  |  |  |  |  |
| 14              | AS & T Staff         |             |  |                        |  |  |  |  |  |  |  |
| 15              | Nonpersonal Services |             |  |                        |  |  |  |  |  |  |  |
| 16              | Total Resources      |             |  |                        |  |  |  |  |  |  |  |

|           |                        |  |  |  |  |  |  |  |  |  |  |
|-----------|------------------------|--|--|--|--|--|--|--|--|--|--|
| <b>17</b> | <b>Total LMI AAMCs</b> |  |  |  |  |  |  |  |  |  |  |
|-----------|------------------------|--|--|--|--|--|--|--|--|--|--|