

**EAC HAVCP GRANT - BUDGET WORKSHEET FOR POLL WORKER PROGRAM**

GRANTEE NAME:			
AWARD TYPE:	COMPETITIVE	MATCH %:	10%
PROJECT PERIOD START DATE:		INDIRECT COST % (optional):	
PROJECT PERIOD END DATE:		INDIRECT COST TYPE:	

OMB#: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_

**SECTION A: GRANT PROJECT(S) BUDGET**

POLL WORKER PROJECT BUDGET	YEAR ONE	YEAR TWO	TOTAL
FEDERAL AMOUNT			\$ -
NON FEDERAL MATCH			\$ -
<b>TOTAL:</b>	\$ -	\$ -	\$ -

(OPTIONAL) SERVICE DAY PROJECT BUDGET	NATIONAL POLL WORKER RECRUITMENT DAY	HELP AMERICA VOTE DAY	TOTAL
FEDERAL AMOUNT			\$ -
NON FEDERAL MATCH			\$ -
<b>TOTAL:</b>	\$ -	\$ -	\$ -

COMBINED PROJECT BUDGETS	POLL WORKER PROJECT	SERVICE DAY PROJECT	TOTAL
FEDERAL AMOUNT	\$ -	\$ -	\$ -
NON FEDERAL MATCH	\$ -	\$ -	\$ -
<b>TOTAL:</b>	\$ -	\$ -	\$ -

**SECTION B: BUDGET CATEGORIES**

BUDGET CATEGORIES	FEDERAL	NON-FEDERAL MATCH	TOTAL	% of Total Budget
PERSONNEL	\$ -	\$ -	\$ -	#DIV/0!
FRINGE BENEFITS	\$ -	\$ -	\$ -	#DIV/0!
EQUIPMENT	\$ -	\$ -	\$ -	#DIV/0!
SUPPLIES	\$ -	\$ -	\$ -	#DIV/0!
TRAINING	\$ -	\$ -	\$ -	#DIV/0!
CONTRACTUAL/CONSULTANT	\$ -	\$ -	\$ -	#DIV/0!
TRAVEL	\$ -	\$ -	\$ -	#VALUE!
OTHER (Describe)	\$ -	\$ -	\$ -	#DIV/0!
OTHER (Describe)	\$ -	\$ -	\$ -	#DIV/0!
SUBGRANTS	\$ -	\$ -	\$ -	#DIV/0!
TOTAL DIRECT COSTS	\$ -	\$ -	\$ -	#DIV/0!
INDIRECT COSTS (if applied)	\$ -	\$ -	\$ -	#DIV/0!
<b>TOTAL:</b>	\$ -	\$ -	\$ -	#DIV/0!
<b>% by Source</b>	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

**SECTION C: NON FEDERAL MATCH RESOURCES**

SOURCE DESCRIPTION	NON FEDERAL AMOUNT	OTHER	TOTAL
			\$ -
			\$ -
			\$ -
			\$ -
<b>TOTAL:</b>	\$ -	\$ -	\$ -

Paperwork Reduction Act. In accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. chapter 35), the information collection requirements associated with the programs, as covered in this Notice, have been approved by the Office of Management and Budget (OMB) under OMB Control Number 000000000. Public burden reporting for this collection of information is estimated to average 7 hours per response for individuals completing all parts of this form, including time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. You are not required to answer these questions unless this number is displayed. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, U.S. Election Assistance Commission, 633 3rd Street NW, Suite 200, Washington, DC 20001.