ATTACHMENT C-1
Budget Summary

Program: Food for Peace
Country of Operation:
Implementing Organization:
Fiscal Year: 2025
Agreement or Proposal Number: Fxx-xxx-20xx/0xx-00

Total Amount of Federal Funds Obligated

Funding Source	Funding Year	Commodity Cost	Freight Cost	Administrative Costs (cash portion)	Total Federal Funding Obligated
FFP	2025	$0.00	$0.00	$0.00	$0.00

Project Operating Budget

Expense Type	Monetization Proceeds (N/A to FFP)	FFP Funds	Cost Share	Total w/out Cost Share	Total w/Cost Share
Administration					
Salaries/Personnel	$0.00	$0.00	$0.00	$0.00	$0.00
Benefits	$0.00	$0.00	$0.00	$0.00	$0.00
Travel	$0.00	$0.00	$0.00	$0.00	$0.00
Professional Services/Contractual	$0.00	$0.00	$0.00	$0.00	$0.00
Equipment	$0.00	$0.00	$0.00	$0.00	$0.00
Office	$0.00	$0.00	$0.00	$0.00	$0.00
Supplies	$0.00	$0.00	$0.00	$0.00	$0.00
Other	$0.00	$0.00	$0.00	$0.00	$0.00
Total Administration	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**
Activities					
Activity 1: *Insert Description*	$0.00	$0.00	$0.00	$0.00	$0.00
Activity 2: *Insert Description*	$0.00	$0.00	$0.00	$0.00	$0.00
Activity 3: *Insert Description*	$0.00	$0.00	$0.00	$0.00	$0.00
Activity 4: *Insert Description*	$0.00	$0.00	$0.00	$0.00	$0.00
(Insert additional activities as needed)					
Total Activities	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**
Commodity and Food Purchases (N/A to FFP)					
Commodity Procurement (N/A to FFP)					
Food Vouchers (N/A to FFP)					
Cash Transfers (N/A to FFP)					
Total Commodity Procurement	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**
ITSH					
Salaries	$0.00	$0.00	$0.00	$0.00	$0.00
Benefits	$0.00	$0.00	$0.00	$0.00	$0.00
Travel	$0.00	$0.00	$0.00	$0.00	$0.00
Internal Transportation	$0.00	$0.00	$0.00	$0.00	$0.00
Professional Services	$0.00	$0.00	$0.00	$0.00	$0.00
Warehouse	$0.00	$0.00	$0.00	$0.00	$0.00
Supplies	$0.00	$0.00	$0.00	$0.00	$0.00
Other	$0.00	$0.00	$0.00	$0.00	$0.00
Total ITSH	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**
Total Direct Costs	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**
Indirect Costs					
ICR on Administration	$0.00	$0.00		$0.00	
ICR on Activities	$0.00	$0.00		$0.00	
ICR on Commodity and Food Purchases (N/A to FFP)					
ICR on ITSH	$0.00	$0.00		$0.00	
Total Indirect Costs	**$0.00**	**$0.00**		**$0.00**	
Anticipated Program Income					$0.00
Grand Total Costs	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**

Total Amount of Federal Award (Total Federal Funds Obligated Plus Cost Share): $0.00

Item	Type of Unit	Year 1 Cost	Year 1 Quantity	Year 1 Percent Allocated	Year 1 Total	Year 2 Cost	Year 2 Quantity	Year 2 Percent Allocated	Year 2 Total	Year 3 Cost	Year 3 Quantity	Year 3 Percent Allocated	Year 3 Total	Year 4 Cost	Year 4 Quantity	Year 4 Percent Allocated	Year 4 Total	Year 5 Cost	Year 5 Quantity	Year 5 Percent Allocated	Year 5 Total	Total
Direct Costs																						
Salaries																						
USN/TCN Staff																						
(Insert each staff)					$0				$0				$0				$0				$0	$ -
					$0				$0				$0				$0				$0	$ -
Total: Expatriate Salaries & Wages					**$0**				**$0**				**$0**				**$0**				**$0**	$ -
CCN Staff																						
(Insert each staff)					$0				$0				$0				$0				$0	$ -
					$0				$0				$0				$0				$0	$ -
Total Local Salary Cost					**$0**				**$0**				**$0**				**$0**				**$0**	$ -
HQ Staff																						
(Insert each staff)					$0				$0				$0				$0				$0	$ -
					$0				$0				$0				$0				$0	$ -
Total HQ Staff					**$0**				**$0**				**$0**				**$0**				**$0**	$ -
Subtotal: Salaries & Wages					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Fringe																						
USN/TCN Staff					$0				$0				$0				$0				$0	$ -
CCN Staff					$0				$0				$0				$0				$0	$ -
HQ Staff					$0				$0				$0				$0				$0	$ -
Total: Fringe Benefits					**$0**				**$0**				**$0**				**$0**				**$0**	$ -
Allowances																						
USN/TCN Staff					$0				$0				$0				$0				$0	$ -
(Insert each staff)					$0				$0				$0				$0				$0	$ -
Total: Allowances					**$0**				**$0**				**$0**				**$0**				**$0**	$ -
Subtotal: Benefits					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
International Travel					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Local Travel					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Vehicle Fuel and Rentals					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Per Diem					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Subtotal: Travel					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Commodity transport																						
Dispatch	MT				$0				$0				$0				$0				$0	$ -
Retrival	MT				$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Subtotal: Internal Transportation					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Professional Services																						
Support Services					$0				$0				$0				$0				$0	$ -
Call Forward Fees					$0				$0				$0				$0				$0	$ -
Special Studies					$0				$0				$0				$0				$0	$ -
Contractual					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Subtotal: Professional Services/Contractual					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Warehouse																						
Warehouse Rent					$0				$0				$0				$0				$0	$ -
Pallets					$0				$0				$0				$0				$0	$ -
Fire Extingusher					$0				$0				$0				$0				$0	$ -
Cleaning Supplies					$0				$0				$0				$0				$0	$ -
Laptops					$0				$0				$0				$0				$0	$ -
Repackaging					$0				$0				$0				$0				$0	$ -
Protective Clothing					$0				$0				$0				$0				$0	$ -
Warehouse Equipment					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Subtotal: Warehouse					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Equipment (>$10000/unit)																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Equipment					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Office																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Office					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Supplies																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Supplies					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Other Direct Cost																						
Maintenance																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Training																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Insurance																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Sub-recipient																						
[name]					$0				$0				$0				$0				$0	$ -
[name]					$0				$0				$0				$0				$0	$ -
Grants																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Other Direct Cost					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Subtotal Direct Cost					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Indirect Costs																						
ICR on Administration					$0				$0				$0				$0				$0	$ -
ICR on Activities					$0				$0				$0				$0				$0	$ -
ICR on ITSH					$0				$0				$0				$0				$0	$ -
Subtotal Indirect Cost					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Total Estimated Cost (Direct Cost + Indirect Cost)					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Cost Share																						
Cost Share Element					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -

Item	Type of Unit	Year 1 Cost	Year 1 Quantity	Year 1 Percent Allocated	Year 1 Total	Year 2 Cost	Year 2 Quantity	Year 2 Percent Allocated	Year 2 Total	Year 3 Cost	Year 3 Quantity	Year 3 Percent Allocated	Year 3 Total	Year 4 Cost	Year 4 Quantity	Year 4 Percent Allocated	Year 4 Total	Year 5 Cost	Year 5 Quantity	Year 5 Percent Allocated	Year 5 Total	Total
Direct Costs																						
Salaries																						
USN/TCN Staff																						
(Insert each staff)					$0				$0				$0				$0				$0	$ -
					$0				$0				$0				$0				$0	$ -
Total: Expatriate Salaries & Wages					**$0**				**$0**				**$0**				**$0**				**$0**	**$ -**
CCN Staff																						
(Insert each staff)					$0				$0				$0				$0				$0	$ -
					$0				$0				$0				$0				$0	$ -
Total Local Salary Cost					**$0**				**$0**				**$0**				**$0**				**$0**	**$ -**
HQ Staff																						
(Insert each staff)					$0				$0				$0				$0				$0	$ -
					$0				$0				$0				$0				$0	$ -
Total HQ Staff					**$0**				**$0**				**$0**				**$0**				**$0**	**$ -**
Subtotal: Salaries & Wages					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Fringe																						
USN/TCN Staff					$0				$0				$0				$0				$0	$ -
CCN Staff					$0				$0				$0				$0				$0	$ -
HQ Staff					$0				$0				$0				$0				$0	$ -
Total: Fringe Benefits					**$0**				**$0**				**$0**				**$0**				**$0**	**$ -**
Allowances																						
USN/TCN Staff					$0				$0				$0				$0				$0	$ -
(Insert each staff)					$0				$0				$0				$0				$0	$ -
Total: Allowances					**$0**				**$0**				**$0**				**$0**				**$0**	**$ -**
Subtotal: Benefits					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
International Travel					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Local Travel					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Vehicle Fuel and Rentals					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Per Diem					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Subtotal: Travel					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Professional Services																						
Support Services					$0				$0				$0				$0				$0	$ -
Call Forward Fees					$0				$0				$0				$0				$0	$ -
Special Studies					$0				$0				$0				$0				$0	$ -
Contractual					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Subtotal: Professional Services/Contractual					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Equipment (>$10000/unit)																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Equipment					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Office																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Office					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Supplies																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Supplies					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Other Direct Cost																						
Maintenance																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Training																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Insurance																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Sub-recipient																						
[name]					$0				$0				$0				$0				$0	$ -
[name]					$0				$0				$0				$0				$0	$ -
Grants																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Other Direct Cost					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Subtotal Direct Cost					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Indirect Costs																						
ICR on Administration					$0				$0				$0				$0				$0	$ -
ICR on Activities					$0				$0				$0				$0				$0	$ -
ICR on ITSH					$0				$0				$0				$0				$0	$ -
Subtotal Indirect Cost					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Total Estimated Cost (Direct Cost + Indirect Cost)					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**

Item	Type of Unit	Year 1 Cost	Year 1 Quantity	Year 1 Percent Allocated	Year 1 Total	Year 2 Cost	Year 2 Quantity	Year 2 Percent Allocated	Year 2 Total	Year 3 Cost	Year 3 Quantity	Year 3 Percent Allocated	Year 3 Total	Year 4 Cost	Year 4 Quantity	Year 4 Percent Allocated	Year 4 Total	Year 5 Cost	Year 5 Quantity	Year 5 Percent Allocated	Year 5 Total	Total
Direct Costs																						
Salaries																						
USN/TCN Staff																						
(Insert each staff)					$0				$0				$0				$0				$0	$ -
					$0				$0				$0				$0				$0	$ -
Total: Expatriate Salaries & Wages					**$0**				**$0**				**$0**				**$0**				**$0**	$ -
CCN Staff																						
(Insert each staff)					$0				$0				$0				$0				$0	$ -
					$0				$0				$0				$0				$0	$ -
Total Local Salary Cost					**$0**				**$0**				**$0**				**$0**				**$0**	$ -
HQ Staff																						
(Insert each staff)					$0				$0				$0				$0				$0	$ -
					$0				$0				$0				$0				$0	$ -
Total HQ Staff					**$0**				**$0**				**$0**				**$0**				**$0**	$ -
Subtotal: Salaries & Wages					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Fringe																						
USN/TCN Staff					$0				$0				$0				$0				$0	$ -
CCN Staff					$0				$0				$0				$0				$0	$ -
HQ Staff					$0				$0				$0				$0				$0	$ -
Total: Fringe Benefits					**$0**				**$0**				**$0**				**$0**				**$0**	$ -
Allowances																						
USN/TCN Staff					$0				$0				$0				$0				$0	$ -
(Insert each staff)					$0				$0				$0				$0				$0	$ -
Total: Allowances					**$0**				**$0**				**$0**				**$0**				**$0**	$ -
Subtotal: Benefits					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
International Travel					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Local Travel					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Vehicle Fuel and Rentals					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Per Diem					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Subtotal: Travel					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Professional Services																						
Support Services					$0				$0				$0				$0				$0	$ -
Call Forward Fees					$0				$0				$0				$0				$0	$ -
Special Studies					$0				$0				$0				$0				$0	$ -
Contractual					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)																						
Subtotal: Professional Services/Contractual					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Equipment (>$10000/unit)																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Equipment					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Office																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Office					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Supplies																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Supplies					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Other Direct Cost																						
Maintenance																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Training																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Insurance																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Sub-recipient																						
[name]					$0				$0				$0				$0				$0	$ -
[name]					$0				$0				$0				$0				$0	$ -
Grants																						
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal: Other Direct Cost					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Subtotal Direct Cost					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Indirect Costs																						
ICR on Administration					$0				$0				$0				$0				$0	$ -
ICR on Activities					$0				$0				$0				$0				$0	$ -
ICR on ITSH					$0				$0				$0				$0				$0	$ -
Subtotal Indirect Cost					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Total Estimated Cost (Direct Cost + Indirect Cost)					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**
Cost Share																						
Cost Share Element					$0				$0				$0				$0				$0	$ -
(Insert additional line or sub-line item)					$0				$0				$0				$0				$0	$ -
Subtotal Cost Share					**$0**				**$0**				**$0**				**$0**				**$0**	**$0**

Item	Type of Unit	Cost
Direct Costs		
Salaries		
USN/TCN Staff		
(Insert each staff)		
Total: Expatriate Salaries & Wages		
CCN Staff		
(Insert each staff)		
Total Local Salary Cost		
HQ Staff		
(Insert each staff)		
Total HQ Staff		
Subtotal: Salaries & Wages		
Fringe		
USN/TCN Staff		
CCN Staff		
HQ Staff		
Total: Fringe Benefits		
Allowances		
USN/TCN Staff		
(Insert each staff)		
Total: Allowances		
Subtotal: Benefits		
International Travel		
(Insert additional line or sub-line item)		
Local Travel		
(Insert additional line or sub-line item)		
Vehicle Fuel and Rentals		
(Insert additional line or sub-line item)		
Per Diem		
(Insert additional line or sub-line item)		
Subtotal: Travel		
Commodity transport		
Dispatch	MT	
Retrival	MT	
(Insert additional line or sub-line item)		
Subtotal: Internal Transportation		
Professional Services		
Offloading and Onloading	MT	
Test and Inspection	Shipment	
Fumigation		

Security at Warehouse		
Security System Contract		
(Insert additional line or sub-line item)		
Contractual		
Call Forward Fees		
(Insert additional line or sub-line item)		
Subtotal: Professional Services/Contractual		
Warehouse		
Warehouse Rent		
Pallets		
Fire Extingusher		
Cleaning Supplies		
Laptops		
Repackaging		
Protective Clothing		
Warehouse Equipment		
(Insert additional line or sub-line item)		
Subtotal: Warehouse		
Supplies		
(Insert additional line or sub-line item)		
Subtotal: Supplies		
Other Direct Cost		
Maintenance		
(Insert additional line or sub-line item)		
Training		
(Insert additional line or sub-line item)		
Insurance		
(Insert additional line or sub-line item)		
Sub-recipient		
[name]		
[name]		
Grants		
(Insert additional line or sub-line item)		
Subtotal: Other Direct Cost		
Subtotal Direct Cost		
Indirect Costs		
ICR on Administration		
ICR on Activities		
ICR on ITSH		
Subtotal Indirect Cost		
Total Estimated Cost (Direct Cost + Indirect Cost)		
Cost Share		

Cost Share Element *(Insert additional line or sub-line item)*		
Subtotal Cost Share		
Total Estimated Cost (Direct Cost + Indirect Cost+ Cost Share)		
Anticipated Program Income (for reference - incorporated into above costs)		

Year 1			Year 2		
Quantity	Percent Allocated	Total	Cost	Quantity	Percent Allocated
		$0			
		$0			
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Total	Year 3 Cost	Quantity	Percent Allocated	Total	Cost
$0				$0	
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$0				**$0**	
$0				$0	
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Year 4			Year 5		
Quantity	Percent Allocated	Total	Cost	Quantity	Percent Allocated
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Chart of Accounts

Line#	Account	Account Name
180	50-01-2-020	DIR-USN (Expat) Labor
186	50-01-5-050	DIR-CCN Labor
178	50-01-1-010	DIR-HQ Labor
194	50-03-0-020	DIR-Allocated USN Fringe
197	50-03-0-050	DIR-CCN Fringe
193	50-03-0-010	DIR-Allocated HQ Fringe
202	50-04-8-003	DIR-COLA
287	51-04-2-050	DIR-Int Travel Other

670	61-01-1-003	DIR_Sub-AW (No Fee)
297	51-05-1-002	DIR-Office Equipment
236	51-02-1-001	DIR-Prof. Serv Labor
236	51-02-1-001	DIR-Prof. Serv Labor
316	51-08-1-001	DIR-Office Rent
250	51-02-2-008	DIR-Security
317	51-08-1-002	DIR-Office Make Ready
318	51-08-1-003	DIR-Office Maintenance