

ATTACHMENT B-1 - EXPENDITURE BASED BUDGET

PROJECT NAME:

CONTRACTOR/SFS PAYEE NAME:

CONTRACT PERIOD: From: _____
To: _____

CATEGORY OF EXPENSE	STATE SHARE
SALARIES/WAGES for personnel, including any of the following:	\$
Executive Director	
Administrative/Professional Staff	
Support/Clerical Staff	
Maintenance/Security Staff	
FRINGE BENEFITS	
employer contributions for benefits such as health insurance < FICA, etc., for personnel noted above.	
OPERATING EXPENSES	
to include office rent, utilities, phones, insurances, etc.	
CONSULTANT SERVICES	
to include fees for services such as accounting, advertising, audit, instructional and legal services	
PERFORMANCE FEES	
including performers/musicians/artists and/or production personnel	
RENTALS	
including venue or equipment	
PURCHASES	
PRINTING	
TOTAL (MUST EQUAL THE FULL GRANT AMOUNT)	\$