

# Project Budget

(Public Service Activities Only)

Federal Fiscal  
Year 2022  
CDBG

October 1, 2022 through  
September 30, 2023

Applicant/Sponsor Name:

Project/Activity Title:



Provide a detailed cost estimate. Indicate all sources of funds and project costs, including those not financed with CDBG funds. Please note that if the project is approved, the budget becomes a binding part of the contract between the applicant and the Town of Union.

## PERSONAL SERVICES (SALARIES)

Employee Name	Title	Total Budget	CDBG Portion	Other Funding	% of Budget from CDBG
Ex. Jane Doe	Executive Director	\$35,000	\$17,500	\$17,500	50%
TOTALS:					

## FRINGE BENEFITS & PAYROLL TAXES

Cost Item (Health, FICA, etc.)	Employee Name	Total Budget	CDBG Portion	Other Funding	% of Budget from CDBG
Ex. Health Insurance	Jane Doe	\$12,000	\$6,000	\$6,000	50%
TOTALS:					

## OPERATING & ADMINISTRATIVE EXPENSES (OTHER THAN PERSONAL SERVICES)

Cost Item (Rent, Utilities, Insurance, etc.)	Total Budget	CDBG Portion	Other Funding	% of Budget from CDBG
Ex. Rent	\$12,000	\$6,000	\$6,000	50%
COMBINED TOTAL PROJECT COSTS:				

Please be sure to check your math. This form does not automatically calculate totals.  
\*The first row of each section serves as an example.