

FORM D. FINANCIAL INFORMATION

I. BUDGET FORM¹

Applicants shall include detailed itemizations of anticipated expenses on the forms below and shall include explanation in narrative form for each expense.

Budget Category	Sub-Recipient #2 Budget	Sub-Recipient #3 Budget	Sub-Recipient #4 Budget
Revenue			
Government	_____	_____	_____
Foundations/Corporations			
Earned Revenue/Contracts			
Donor Contributions			
Other			
Total Revenue			
Expenses			
Personnel			
<i>For additional staff positions, itemize on separate sheet.</i>			
Salary for Staff 1	_____	_____	_____
Salary for Staff 2	_____	_____	_____
Salary for Staff 3	_____	_____	_____
Salaries Subtotal	_____	_____	_____
Benefits (e.g., medical, dental, vacation)	_____	_____	_____
Subtotal Salary and Benefits			

¹ Up to 25% of an awarded grant may be used for an allocated share of administrative overhead costs, but only if included and justified in the proposed budget submitted with the original application.

Request for Proposals
National Mortgage Settlement Funds

Non-personnel

Space	_____	_____	_____
Meetings/Conferences	_____	_____	_____
Telecommunications	_____	_____	_____
Supplies	_____	_____	_____
Equipment Rental/Maintenance	_____	_____	_____
Travel	_____	_____	_____
Training	_____	_____	_____
Insurance	_____	_____	_____
Audit	_____	_____	_____
Printing and Publications	_____	_____	_____
Professional Services/Consulting	_____	_____	_____
Evaluation	_____	_____	_____
Other (<i>itemize on separate sheet</i>)	_____	_____	_____

Total Expenses

Net Revenue

*Attach additional sheets as necessary for additional sub-recipients.