

Description (4)

Unit Cost	x	Quantity		Total
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Description (5)

Unit Cost	x	Quantity		Total
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Description (6)

Unit Cost	x	Quantity		Total
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Total Supplies

Comment

3. Equipment**Description (1)**

Unit Cost	x	Quantity	=	Total
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Description (2)

Unit Cost	x	Quantity	=	Total
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Description (3)

Unit Cost	x	Quantity	=	Total
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Description (4)

Unit Cost	x	Quantity	=	Total
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Description (5)

Unit Cost	x	Quantity	=	Total
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Description (6)

Unit Cost	x	Quantity	=	Total
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Total Equipment

Comment

4. Travel

List trips by their purpose and/or destination in the Scope of Services, a separate narrative should be attached. Indicate the number of days for each trip and the per diem. Keep in mind the FWC can only pay for travel at the approved State rate. Use "Fare/Rate" for mileage rate and multiply by "Mileage", or for travel fare and put 1 in "Mileage".

Purpose/Destination (1)

Days	x	Per Diem	+	Fare/Rate	x	Mileage	Total (1)
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Purpose/Destination (2)

Days	x	Per Diem	+	Fare/Rate	x	Mileage	Total (2)
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Purpose/Destination (3)

Days	x	Per Diem	+	Fare/Rate	x	Mileage	Total (3)
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Total Travel**5. Contractual**

Subcontractors should provide the same information required by this budget form, with the following exceptions: (a) when professional services are provided at a pre existing approved rate or fee shown on the budget; or (b) the subcontract is to be obtained competitively. For either (a) or (b), show an estimated maximum amount and provide an attached explanation as to how it was determined. Contractual services other than fixed price will be compensated by the FWC on a cost reimbursement basis.

Name/Services (1)

Fee/Rate x Hours = Total

Name/Services (2)

Fee/Rate x Hours = Total

Total Contractual

6. Miscellaneous

List expenses not included in any of the above categories. Non expendable equipment valued at less than \$500 may be listed also. Include only expenses directly related to the project, not expenses of a general nature.

Description (1)

Unit Cost x Quantity = Total

Description (2)

Unit Cost x Quantity = Total

Description (3)

Unit Cost x Quantity = Total

Miscellaneous Total

7. Overhead/Indirect Rate

Indicate the approved overhead/indirect cost rate, the dollar amount of the base to which it is applied, and the resulting total. Identify the base (cost categories) to which the rate is applied on the line indicated. State agencies are limited to 10% of the total budget for overhead/indirect costs.

10% Rate * =

8. Total Budget

Show the total of categories 1 through 7.

Total Program Budget

9. Match Or Other Contribution

List all expenses from other match funding or contribution for this project.

- | | |
|----|-----------|
| 1. | Amount \$ |
| 2. | Amount \$ |
| 3. | Amount \$ |
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CONTRACTOR

Contractor Signature

FWC Project Manager