

ATTACHMENT B EXPENDITURE BUDGET

SUMMARY

Contractor SFS Payee Name:

Project Name:

Contract Number:

Contract Period:

CATEGORY OF EXPENSE	GRANT FUNDS	MATCH FUNDS	MATCH %	TOTAL
1. Personnel Services				
a) Salary				
b) Fringe				
Subtotal				
2. Non-Personnel Services				
a) Contractual Services				
b) Travel				
c) Equipment				
d) Space/Property & Utilities				
e) Operating Expenses				
f) Other				
Subtotal				
TOTAL				

Contractual Services - Type/Description	Total
Total	

Travel - Type/Description	Total
Total	

Equipment - Type/Description	Total
Total	

Space/Property Expenses: Own - Type/Description	Total
Total	

Other - Type/Description	Total
Total	