

Feb 2, 2022

App	olicant/Reci	pient									Appli	cation/Award	Number
Sub	stance Abus	se and M	ental Health Orga	nization	Inc.						SM12	345-01	
Pro	ject Title:		Reducing	the Imp	act of	Substar	ice Ab	use ar	nd Menta	al Illness	in our Cor	mmunity	
			l .										
				Start D	ate			I	End Dat			Budget Ye	
	Budget	Period:		09/30/2	022			0	9/29/202	23		1	<u>O,</u>
				_								1	5
			(MYF) awards on the Incremental Pe	-)
CITE	CK THE DOX T	O SCICCI	ine morementar r	Silou								400	
CO	ST SHAR	ING AN	ID MATCHING										
N/I -4	ahina Daa	.lua al.			7 NO						Q		
wat	ching Requ	ıırea:	YES	×	NO								
A. F	Personne	l								X			
	_									(O.			
Line	e			Key	Check			С	alculation			FEDERAL	
Iter #	n Posit	ion	Name	Position per the NOFO	if Hourly Rate	Hourly Rate	Hours	# of Staff	Annual Salary	% Level of Effort (LOE)	Personnel Cost	REQUEST	
1	Project Direct	tor	Alice Doe				C		\$64,890	10.00%	\$6,489	\$6,489	
2	Program Coo	dinator	Vacant, to be hired within 60 days of anticipated award date	e 🗆		•	S	1	\$46,276	100.00%	\$46,276	\$46,276	
			-			01.				TOTAL	\$52,765	\$52,765	
					Ć	14							
Line Iter	Personne	el Narra	tive:	Ċ	N	,							
	Project Directo	r	Alice Doe	Key Pe	rsonnel	Salary	\$64,890) # c	of Staff 1		LOE 10.00%	Personnel Co	ost \$6,489
1			r will provide daily ties, internal and e										lementatior
	Program Coodi		Vacant, to be hired within 60 days of	, coman	0001411		\$46,276		of Staff 1		LOE 100.00%	Personnel Co	ost \$46,276
2		am Coord	dinator will coordin	ate proj	ect se	rvices a	nd act	ivities,	includir	ıg trainir	ng, commui	nication, and i	nformation
L	disseminat	ion.											
	Show In-K	ind Pers	onnel Table										
			<i>y</i>										
In-	-Kind Perso	nnel											
Line Iter	n Posit	ion	Name	Key Position per the	Check if Hourly	Hourly Rate	Hours	# of Staff	Annual Salary	% Level of Effort (LOE)			
1	Clinical Direc	tor	Mary Brown	FOA	Rate			1	\$85,000				
7			-										
Line	In-Kind P	ersonn	el Narrative:										
#	Clinical Directo		Mary Brown			Salan	\$85,000) # c	of Staff 1		LOE 20.00%	Personnel Co	ost \$17,000
						-						health indicate	



B. Fringe Benefits

Our organization's fringe benefits consist of the components shown below:

Fringe Component	Rate (%)
Retirement	7.50%
FICA	7.65%
Health Insurance	10.00%
Unemployment Insurance	1.50%
Total Fringe Rate	26.65%

Fringe Benefits Cost

				Calc	ulation		
Line Item #		Name	Personnel Cost	Total Fringe Rate (%)	Fixed / Lump Sum Fringe (if any)	Fringe Benefits Cost	FEDERAL REQUEST
1	Project Director	Alice Doe	\$6,489	26.65%		\$1,729	\$1,729
2	Program Coodinator	Vacant, to be hired within 60 days of anticipated award date	\$46,276	26.65%	7.	\$12,333	\$12,333
			Ç.	0	TOTAL	\$14,062	\$14,062

Fringe Benefits Narrative:

There are no differences in the Total Fringe Rate for the staff proposed. No Fixed/Lump Sum Fringe is requested.

C. Travel

		Destination				FEDERAL				
Trip #	Purpose			Item	Cost / Rate per Item	Basis	Quantity per Person	Number of Persons	Travel Cost	FEDERAL REQUEST
		Chicago, IL to Washington, DC		Hotel/Lodging	\$258.00	Night	2.00	2	\$1,032	
1	National Conference	Washington, DC		Per Diems (M&IE only)	\$79.00	Day	2.00	2	\$316	\$1,748
	Sometonise			Airfare	\$200.00	Round Trip	1.00	2	\$400	φ1,740
		0, 3								
2	Local Travel	various		Local Travel (POV Mileage)	\$0.55	Mile	960.00	2	\$1,056	\$1,056
2	70									φ1,030
	2/6						7	OTAL	\$2,804	\$2,804

7	rip #	Travel Narrative:					
	- 1	Substance Abuse and Mental Heath	Chicago, IL to Washington, DC	Travel Cost \$1,748			
1	- 1	Two staff (Project Director and Program Coordinator) will attend the annual National Conference on Substance Abuse and Mental Health scheduled to be held in Washington, D.C., from June 14-15, 2023.					
		Local Travel	various	Travel Cost \$1,056			



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Trip	Travel	Narrative	ľ
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² Local travel is needed for staff to attend local meetings and training events, and conduct project activities in the geographic catchment area. Privately-owned vehicle (POV) mileage reimbursement rate is based on the organization's policies.

D. Equipment

		Check Calculation If Item Purchase or Percent					
Line Item #			Quantity	Purchase or Rental/Lease Cost	Percent Charged to the Project	Equipment Cost	FEDERAL REQUEST
1	N/A					\$0	\$0
					TOTAL	\$0	\$0

Li Ite	Equipme	nt Narrative:				
	N/A	Quantity	Purchase or Rental/Lease Cost	% Charged to the Project	Equipment Cost	\$0
	N/A					

E. Supplies

				Calculation			
Line Item #		Unit Cost	Basis	Quantity	Duration	Supplies Cost	FEDERAL REQUEST
1	Supplies for various project activities	\$50.00	per month		12.00	\$600	\$600
2	Laptop	\$900.00	per laptop	1.00		\$900	\$900
3	Printer	\$300.00	per printer	1.00		\$300	\$300
4	Printing supplies	\$37.00	per month		12.00	\$444	\$444
5	Projector	\$900.00	per projector	1.00		\$900	\$900
6	Copies	\$0.10	per copy	8,000.00		\$800	\$800
	\bigcirc				TOTAL	\$3,944	\$3,944

Line Item #	Supplies Narrative:								
	Supplies for various project activities	Unit Cost \$50.00	Basis per month	Quantity	Duration 12.00	Supplies Cost \$600			
Supplies including office consumables such as notebooks, folders, binders, pens, highlighters etc. will be used be personnel for the sole direct benefit of the project.									
	Laptop	Unit Cost \$900.00	Basis per laptop	Quantity 1.00	Duration	Supplies Cost \$900			
2	The Project Director will use the laptop for presentations and other project related communications, documents, and activities. This is a one-time expense. Cost was based on retail value at the time the application was written.								
	Printer	Unit Cost \$300.00	Basis per printer	Quantity 1.00	Duration	Supplies Cost \$300			
3	The printer will be used to print presentations and other documents for the project. This is a one-time expense. Cost was based on retail value at the time the application was written.								
	Printing supplies	Unit Cost \$37.00	Basis per month	Quantity	Duration 12.00	Supplies Cost \$444			
4	Supplies (ink cartridges and paper) are needed for the printer.								
	Projector	Unit Cost \$900.00	Basis per projector	Quantity 1.00	Duration	Supplies Cost \$900			



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Line Item #	Supplies Narrative:					
		d for project presentations, whe time the application was		training events. Th	nis is a one-ti	me expense. Cost was
	Copies	Unit Cost \$0.10	Basis per copy	Quantity 8,000.00	Duration	Supplies Cost \$800
6	Copies of handouts are n	needed for various project a	ctivities includin	g presentations, w	orkshops, an	d training events.

F. Contractual

Summary of Contractual Costs

Agree- ment #	Name of Organization or Consultant	Type of Agreement	Contractual Cost	FEDERAL REQUEST
1	Certified Trainers, Inc.	Contract	\$2,250	\$2,250
2	Client Treatment Services, Inc.	Subaward	\$25,000	\$25,000
3	John Smith (Case Manager)	Consultant	\$57,550	\$57,550
4	Jane Johnson (Evaluator)	Consultant	\$9,772	\$9,772
5	TBD (Community Education and Engagement Specialist)	Consultant	\$6,625	\$6,625
	TOTAL	100	\$101,197	\$101,197
		\$O'		

Contractual Details for	Certified Trainers, Inc.	.5	•

Agree-	Comison		D-I			Provided
	Services	and	Dei	ıverai	Dies	Provided

Certified trainers will provide three (3) organization staff with recovery and wellness training so they will be equipped with current approaches and evidence-based practices on mental health recovery and wellness. The contract with Certified Trainers Inc. will be procured as a micro-purchase with a period of performance identical to the budget period 9/30/2022 to 09/29/2023.

The Program Coordinator will oversee the contract with Certified Trainers Inc. The Program Coordinator will review the daily training curriculum, schedule, and materials to ensure they are in line with the statement of work and will ensure staff feedback is provided to assess the effectiveness of the training provided.

Personnel		Travel	Supplies	Indirect Charges
Fringe Benefits	700	Equipment	Other	

Contractual Other Costs for Certified Trainers, Inc.

		\ \(\text{\$Q_1} \)							
Line Item #	Item	for Minor A&R	Unit Cost / Rate	Basis	Quantity	Duration	Contractual Other Cost		
		Five-Day Training Session for 3 organization staff		\$750.00	per individual	3.00		\$2,250	\$2,250
							TOTAL	\$2,250	\$2,250

Line Item #	Contractual Other Narrative:			
	Five-Day Training Session for 3 organization staff Unit Cost/Rate \$750.00	Basis per individual Quantity 3	3.00 Duration	Other Cost \$2,250



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Servio	es Administration			•						
Line Item #	Contractual Othe	er Narrative:								
1		will train staff on the population of					s and evi	dence-base	d practices so	they can
Cor	ntractual Total Di	rect Charges for	Certified	Trainers, Inc	C.					
		TOTAL FEDERAL		,						OU
	ARGES FOR THIS AGREEMENT	REQUEST \$2.2	50							à
		ΨΖ,Ζ	30						60	
Cor	ntractual Total Co	ost for Certified T	rainers,	Inc.					OO	
	TOTAL COST	TOTAL FEDERAL REQUEST								
	\$2,250	\$2,2	50							
on	tractual Detail	s for Client Tre	eatment	Services,	Inc.		X	ϕ_{\prime}		
	ntractual Details for Client Treatment Services, Inc. Services and Deliverables Provided We intend to issue a subaward to Client Treatment Services, Inc. for comprehensive client-centered treatment services to 200 clients each year. We plan to procure the services via a small purchase with a period of performance identical to the budget period 9/30/2022 to 09/29/2023. We obtained competitive prices from an adequate number of qualified sources to ensure competition. Refer to the attached summary of services and deliverables for Client Treatment Services, Inc.									
ree- ent #	Services and	Deliverables P	rovided	i			2			
2	We intend to issue a subaward to Client Treatment Services, Inc. for comprehensive client-centered treatment services to 200 clients each year. We plan to procure the services via a small purchase with a period of performance identical to the budget period 9/30/2022 to 09/29/2023. We obtained competitive prices from an adequate number of qualified sources to ensure competition. Refer to the attached summary of services and deliverables for Client Treatment Services, Inc. The Program Coordinator is primarily responsible for overseeing the contract with Client Treatment Services, Inc. This individual will be supported by the Case Manager. They will conduct weekly site visits to monitor and review effectiveness of the services provided, identify problems/issues, and implement necessary changes. They will review reports, records, and data to ensure treatment services are provided to the population of focus, the services or practices that are									
ĪΡ	ersonnel		Travel	CHO	Г	Supplie	·S		Indire	t Charges
	tractual Total Cost for Certified Trainers, Inc. TOTAL COST TOTAL FEDERAL REQUEST \$2,250 \$2,250 tractual Details for Client Treatment Services, Inc. Services and Deliverables Provided We intend to issue a subaward to Client Treatment Services, Inc. for comprehensive client-centered treatment services to 200 clients each year. We plan to procure the services via a small purchase with a period of performance identical to the budget period 9/30/2022 to 09/29/2023. We obtained competitive prices from an adequate number of qualified sources to ensure competition. Refer to the attached summary of services and deliverables for Client Treatment Services, Inc. The Program Coordinator is primarily responsible for overseeing the contract with Client Treatment Services, Inc. This individual will be supported by the Case Manager. They will conduct weekly site visits to monitor and review effectiveness of the services provided, identify problems/issues, and implement necessary changes. They will review reports, records, and data to ensure treatment services are provided to the population of focus, the services or practices that are implemented have a demonstrated evidence base, and are effective per the agreed upon statement of work. Supplies Indirect Charges Indirect									
Cor	ntractual Other C	osts for Client Tr	eatment	Services, Inc	D.					
			Check		Ca	lculation			FEDERAL	
Line Item #	ŀ	tem	Minor		Basis	Quantity	Duration			
1	Client Treatment Se	rvices		\$125.00	/client per year	200.00		\$25,000	\$25,000	
	8	<i></i>					TOTAL	\$25,000	\$25,000	
Line Item	Contractual Other	er Narrative:								
#	Client Treatment Service		Unit Cost	t/Rate \$125.00	Basis /client	per Quar	ntity 200.00	Duration	Other Co	st \$25,000
7	The unit cost/rat	e of \$125/client n	er vear f	or client treat	······································	s is hasad	l on the o	raanization's	s history of ev	nenses

Contractual Total Direct Charges for Client Treatment Services, Inc.

TOTAL DIRECT	TOTAL FEDERAL
CHARGES FOR THIS	REQUEST
AGREEMENT	\$25,000



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SAMHSA Detailed Budget and Narrative Justification

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Contractual Total Cost for Client Treatment Services, Inc.

TOTAL COST	TOTAL FEDERAL REQUEST
\$25,000	\$25,000

Contractual Details for John Smith (Case Manager)

Agreement # Services and Deliverables Provided

The Case Manager, John Smith, is vital to coordinating and organizing comprehensive client treatment services and planning related to the program and leading to successful outcomes. He will be responsible for working closely with Client Treatment Services, Inc. to coordinate and organize client treatment services and planning.

The Case Manager is a consultant whose services will be obtained via small purchase procurement with a period of performance identical to the budget period 9/30/2022 to 09/29/2023. Refer to the attached summary of services and deliverables for the Case Manager.

The Program Coordinator will oversee the agreement with the Case Manager, John Smith. The Program Coordinator will review the Case Manager's weekly reports and feedback from Client Treatment Services, Inc. to ensure he is providing the required support and services per the agreement. The Program Coordinator will meet with the Case Manager weekly to monitor and review progress, identify problems/issues, and implement corrective actions.

Personnel	Travel	Supplies	Indirect Charges
Fringe Benefits	Equipment	Other	

Contractual Personnel Costs for John Smith (Case Manager)

			Key	Check		\	C	alculation			
Line Item #		Name	Position per the NOFO	Annual	Hourly Rate	Hours	# of Persons	Annual Salary	% Level of Effort (LOE)	Contractual Personnel Cost	FEDERAL REQUEST
1	Case Manager	John Smith		\boxtimes			1	\$53,750	100.00%	\$53,750	\$53,750
		×	%						TOTAL	\$53,750	\$53,750

Line Item #	Contractual Persor	nnel Narrative:			_			
	Case Manager	John Smith		Salary \$53,750	# of Persons 1	LOE 100.00%	Personnel Cost \$53,750	
1	The Case Manage		•	nating client tre	atment and relat	ed treatment plan	nning services	
	necessary for the success of the program							

Contractual Travel Costs for John Smith (Case Manager)

	101								
Trip#	Purpose	Destination	Item	Cost / Rate per Item	Basis	Quantity per Person	Number of Persons	Contract Travel Cost	FEDERAL REQUEST
		Chicago, IL to Washington, DC	Hotel/Lodging	\$258.00	Night	2.00	1	\$516	
9	National Conference	Washington, DO	Per Diems (M&IE only)	\$79.00	Day	2.00	1	\$158	\$874
'	Odmerence		Airfare	\$200.00	Round Trip	1.00	1	\$200	Ф074



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			Calculation							EEDEDAL
Trip #	Purpose	Destination		ltem	Cost / Rate per Item	Basis	Quantity per Person	Number of Persons	Contract Travel Cost	FEDERAL REQUEST
2	Local Travel	various		Local Travel (POV Mileage)	\$0.585	Mile	2,492.00	1	\$1,458	\$1,458
										ψ1,430
							Т	OTAL	\$2,332	\$2,332

Trip	Contractual Travel Narrative:		60.)
	Substance Abuse and Mental Heath National	Chicago, IL to Washington, DC	Travel Cost	\$874
1	The Case Manager is required to attend the Natheld in Washington, D.C., from June 14-15, 202	ional Conference on Substance Abuse and Menta 3.	l Health schedu	led to be
	Local Travel	various	Travel Cost	\$1,458
	Travel will be required to coordinate with the Cli geographic catchment area. Local travel rate is effective January 1, 2022.	ent Services Treatment provider and follow up with based on GSA's privately-owned vehicle (POV) mi	clients through leage reimburse	out the ement rate

Contractual Supplies Costs for John Smith (Case Manager)

Lir				Calculation	1		FEDERAL
Ite		Unit Cost	Basis	Quantity	Duration	Contractual Supplies Cost	FEDERAL REQUEST
1	Project supplies	\$47.75	per month	ĶΟ),	12.00	\$573	\$573
			.,0		TOTAL	\$573	\$573

Line Item #	Contractual Supplies Narrative:	3	11.			
	Project supplies	Unit Cost \$47.75	Basis per month	Quantity	Duration 12.00	Supplies Cost \$573
1	The Case Manager will need various	supplies to coord	dinate and orga	nize client trea	atment services.	

Contractual Other Costs for John Smith (Case Manager)

		Check		Ca	lculation			
Line Item #		for Minor A&R	Unit Cost / Rate	Basis	Quantity	Duration	Contractual Other Cost	FEDERAL REQUEST
1	Training Course		\$175.00	per course	1.00		\$175	\$175
2	Cell phone service		\$60.00	per month		12.00	\$720	\$720
	%					TOTAL	\$895	\$895
	\Q ₁							

Line Item #	Contractual Other Narrative	:								
	Training Course	Unit Cost/Rate \$175.00	Basis per course	Quantity 1.00	Duration	Other Cost \$175				
D '(The Case Manager is requir	ed to attend one training se	ssion annually fo	r treatment pro	viders.					
	Cell phone service	Unit Cost/Rate \$60.00	Basis per month	Quantity	Duration 12.00	Other Cost \$720				
2	Cell phone service is needed for communication and collaboration with the treatment service provider and clients.									

Contractual Total Direct Charges for John Smith (Case Manager)



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TOTAL DIRECT	TOTAL FEDERAL
CHARGES FOR THIS	REQUEST
AGREEMENT	\$57,550

Contractual Total Cost for John Smith (Case Manager)

TOTAL COST	TOTAL FEDERAL REQUEST		
\$57,550	\$57,550		

Contractual Details for Jane Johnson (Evaluator)

Sarvicas	and	Daliva	rahlae	Provided
Services	anu	Delive	rabies	Provided

The Evaluator, Jane Johnson, will be responsible for all data collection and reporting required under the NOFO. The Evaluator is an experienced individual (Ph.D. level) with expertise in substance abuse, research and evaluation, is knowledgeable about the population of focus, and will be responsible for all data collection and reporting as required by the NOFO.

The Evaluator is a consultant whose services will be obtained via micro-purchase procurement with a period of performance identical to the budget period 9/30/2022 to 09/29/2023. Refer to the attached summary of services and deliverables for the Evaluator.

The Project Director will oversee the agreement with the Evaluator. The Project Director will review the Evaluator's monthly reports to ensure she is providing the required support and services per the agreement. The Project Director will meet with the Evaluator bi-weekly to monitor and review progress, identify problems/issues, and implement corrective actions.

Personnel	
Fringe Benefits	

∑ Travel	
Equipment	

Supplies
Other

Indirect Charges

Contractual Personnel Costs for Jane Johnson (Evaluator)

			Kev	Check			Ca	alculation			
Line Item #		Name	Position per the NOFO	1 1	Hourly Rate	Hours	# of Persons	Annual Salary	% Level of Effort (LOE)	Contractual Personnel Cost	FEDERAL REQUEST
1	Evaluator	Jane Smith			\$40.00	200	1		9.62%	\$8,000	\$8,000
									TOTAL	\$8,000	\$8,000

Line Item #	Contractual Personnel Narrative:				
	Evaluator Jane Smith	Key Personnel Hourly Rate \$40	# of Persons 1	Hours 200	Personnel Cost \$8,000
1	The Evaluator is needed to implemen	it data collection and reporti	ng activities requ	ired by the NOF	Э.

Contractual Travel Costs for Jane Johnson (Evaluator)

				Calculation					
Th	Purpose	Destination	Item	Cost / Rate per Item	Basis	Quantity per Person	of	Contract Travel Cost	FEDERAL REQUEST
		Chicago, IL to Washington, DC	Hotel/Lodging	\$258.00	Night	2.00	1	\$516	
	National Conference	VVdornington, DO	Per Diems (M&IE only)	\$79.00	Day	2.00	1	\$158	\$874
			Airfare	\$200.00	Round Trip	1.00	1	\$200	φ074



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						Calc	ulation					1
Trip #	Purpose	Destination	1	Item		Cost / Rate per Item	Basis	Quantity per Person	Number of Persons	Contract Travel Cost	FEDERAL REQUEST	1
2	Local Travel	various		Local Travel (POV Mileag	je)	\$0.585	Mile	1,535.00	1	\$898	\$898	Orli
								1	TOTAL	\$1,772	\$1,772	5
Trip	Contractual Trav	el Narrative:									205)
	Substance Abuse and Mental Heath			Chica	ago, II	L to Washing	ton, DC				Travel Cost	\$874
1	The Evaluator is Washington, D.C				erer	nce on Su	ubstance	e Abuse	and Me	ental Hea	lth scheduled	to be held in
	Local Travel			vario	us						Travel Cost	\$898
2	Local travel is ne									al travel r	ate is based o	on GSA's
	privately-owned	vehicle (POV) ı	milea	ige reimburseme	nt ra	ate effect	ive Janu	ary 1, 2	022.			
Car	atractual Total Dir	ant Charges fo	r lo	no Johnson (Evo	duct	ior)		X	0			
COI	ntractual Total Dir	ect Charges to	ı Ja	ne Jonnson (⊑va	ııuaı	.01)		5	,			
	TOTAL DIRECT	TOTAL FEDERA	AL									
CH	AGREEMENT	REQUEST					1					
	AGILLIMENT	\$9	,772			Ç.(O_{J}					
_				(-		. (-)						
Cor	ntractual Total Co	st for Jane Joi	nnso	n (Evaluator)		13						
	TOTAL COST	TOTAL FEDERA	AL									
	\$9,772	\$9	,772	,,0								
	-			6)								
on	tractual Details	for TBD (Co	omn	nunity Educati	on a	and Eng	jageme	ent Spe	cialist)		
				XO								
Agree- nent #	Services and	Deliverables	Pro	vided								
				agement Speciali								
				will develop a pla								
				rices; and provide I and other agend						igs and e	vents to stake	noiders,
				agement Speciali						es will be	obtained via r	nicro-
5	purchase procur							Refer to	the atta	ched sum	nmary of servi	ces and
				reach and Engag ee the agreemer				v Outres	ach and	Engagen	nent Snecialis	t The
				Specialist's mor								
				agreement. The l						the Specia	alist bi-weekly	to monitor
	and review prog	ress, identify p	roble	ms/issues, and in	mple	ement co	rrective	actions.				
7 -	Porconnol] [r		caval			□ c	online]	☐ India	ot Chargas
	Personnel	<u>[</u>		ravel] 			oplies]		ect Charges
F	ringe Benefits		E	quipment			Oth	ner				

Contractual Personnel Costs for TBD (Community Education and Engagement Specialist)



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				Check		Calculation					
Line Item #	Position	Name	Key Position per the NOFO	if Annual	Hourly Rate	Hours	# of Persons	Annual Salary	% Level of Effort (LOE)	Contractual Personnel Cost	FEDERAL REQUEST
1	Community Outreach and Engagement Specialist	TBD			\$26.50	250	1		12.02%	\$6,625	\$6,625
									TOTAL	\$6,625	\$6,625

#	Contractual Personnel Narrativ	e:			ces .
	Community Outreach and Engagement Specialist	Hourly Rate \$26.5	# of Persons 1	Hours 250	Personnel Cost \$6,625
	•	elop and implement a plan for cor annual client enrollment goal for t	•	n and outreach	efforts to engage

TOTAL DIRECT CHARGES FOR THIS	TOTAL FEDERAL REQUEST	iiO.
AGREEMENT	\$6,625	

TOTAL COST	TOTAL FEDERAL REQUEST
\$6,625	\$6,625

H. Other

Coı	ntractual Total Co	ost for TBD (Comm	nunity E	ducation an	d Engagemen	t Special	ist)			
	TOTAL COST	TOTAL FEDERAL REQUEST								
	\$6,625	\$6,625	5		80					
	6. Construction: Not Applicable 1. Other									
			Check		Ca	culation				
Line Item #	I	Item	Check if Minor A&R	Unit Cost / Rate	Basis	culation Quantity	Duration	Other Cost	FEDERAL REQUEST	
Item	Rent for project site		if Minor	Rate					REQUEST	
Item #	I		if Minor	\$5.75 \$100.00	Basis per sq. ft. per month per month	Quantity		\$51,750	REQUEST	
Item #	Rent for project site		if Minor	\$5.75 \$100.00	Basis per sq. ft. per month	Quantity	12.00	\$51,750	REQUEST \$51,750	
1 2 3	Rent for project site Cell phone service		if Minor	\$5.75 \$100.00 \$10.00	Basis per sq. ft. per month per month per client follow	Quantity 750.00	12.00	\$51,750 \$1,200	\$51,750 \$1,200	

Lir Ite	Line ltem # Other Narrative:					
	Rent for project site	Unit Cost/Rate \$5.75	Basis per sq. ft. per month	Quantity 750.00	Duration 12.00	Other Cost \$51,750
7	We are requesting rental cost site will be used for staff and meetings, vocational and edu plan and coordinate activities share of the space. Refer to a Questionnaire for more detail.	consultants to coordinate a licational counseling session for client supports. The rer attached signed copy of the	and implement pro ns with clients, me nt was calculated e rental lease agre	etings with loca by square foota	uch as Ádvisory al authorities ar age and reflects	Working Group and organizations to SAMHSA's fair
	Cell phone service	Unit Cost/Rate \$100.00	Basis per month	Quantity	Duration 12.00	Other Cost \$1,200



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Item #	Other Narrative:					
2	The monthly cell phone service co Cell phone service is needed for co catchment area.					
3	Incentives	Unit Cost/Rate \$10.00	Basis per client follow up	Quantity 200.00	Duration	Other Cost \$2,000
3	\$10 non-cash incentives (such as	gift cards and bus pa	sses) will be award	ded to 200 client	s for data co	ollection follow up.
	Brochures	Unit Cost/Rate \$0.90	Basis per brochure	Quantity 1,500.00	Duration	Other Cost \$1,350
4	Brochures will be needed for progruorkshops, and seminars.	am outreach at vario	us community and	other sponsore	d events sud	ch as health fairs,
To	otal Direct Charges				OU	60
To	-	TOTAL FEDE	ERAL REQUEST		RUE	80
To	otal Direct Charges TOTAL DIRECT CHARGES				N Pur	60
	-			Istratio	n Pur	80

I. Total Direct Charges

TOTAL DIRECT CHARGES	TOTAL FEDERAL REQUEST
TOTAL DIRECT CHARGES	\$231,072

J. Indirect Charges

Type of IDC Rate / Cost Allocation Plan

We will apply the rate in our approved federally negotiated IDC rate agreement

Indirect Charges

End Date of Effective Period of		FEDERAL		
Approved IDC Rate Agreement	Approved IDC Rate (%)	Approved Base	IDC	REQUEST
06/30/2024	12.00%	\$66,827	\$8,019	\$8,019
		TOTAL	\$8,019	\$8,019

Indirect Charges Narrative:

- 1. Our organization's approved IDC rate is 12.00% of personnel and fringe costs effective through 06/30/2024.
- 2. We applied our IDC rate to personnel and fringe costs only, which is the approved base stated in our IDC rate agreement.
- 3. Our approved IDC rate is in effect at the beginning of the budget period.
- 4. We have attached a copy of our approved federally negotiated IDC rate agreement.

REVIEW OF COST SHARING AND MATCHING

Cost sharing or matching is not required for this grant.

BUDGET SUMMARY: YEAR 1

BUDGET CATEGORY	FEDERAL REQUEST
A. Personnel	\$52,765
B. Fringe Benefits	\$14,062
C. Travel	\$2,804

D. Equipment	\$0
E. Supplies	\$3,944
F. Contractual	\$101,197
G. Construction (N/A)	\$0
, ,	**
H. Other I. Total Direct Charges	\$56,300
(sum of A to H)	\$231,072
J. Indirect Charges	\$8,019
Total Projects Costs (sum of I and J)	\$239,091

BUDGET SUMMARY FOR REQUESTED FUTURE YEARS

E. Supplies	\$	\$3,944					
F. Contractual	\$10	01,197					
G. Construction (N/A)		\$0					
H. Other	\$5	56,300					
I. Total Direct Charges (sum of A to H)	\$23	31,072					
J. Indirect Charges	4	\$8,019					
Total Projects Costs (sum of I and J)	\$23	39,091					
BUDGET SUMM	Year 2 FEDERAL		3	Year	4 DERAL	Yea	
Budget Category	REQUEST	REQUES			UEST		EQUEST
A. Personnel	\$54,348	\$55	5,978		\$57,657		\$59,38
B. Fringe Benefits	\$14,062	\$14	4,484		\$14,484		\$14,484
C. Travel	\$2,804	\$2	2,804		\$2,804		\$2,80
D. Equipment							&O
E. Supplies	\$1,844	\$	1,844		\$1,844	*	\$1,84
F. Contractual	\$101,165	\$10	1,165		\$101,165		\$101,16
G. Construction	\$0	,	\$0		\$0		\$(
H. Other	\$57,853	\$5	7,853	CX	\$57,853		\$57,85
I. Total Direct Charges (sum A to H)	\$232,076	\$23	4,128		\$235,807		\$237,53
J. Indirect Charges	\$8,209	\$	8,455		\$8,657		\$8,86
Total Project Costs (sum of I and J)	\$240,285	\$24:	2,583		\$244,464		\$246,40

Budget Summary Narrative:

- 1. Personnel costs for future years include an annual 3% cost of living adjustment (COLA). See attached organization policy on COLA.
- 2. The fringe benefit rate for full-time employees for years 01 and 02 is calculated at 26.65%. We project a 3% increase (from 26.65% to 27.45%) in fringe benefit costs for years 03, 04, and 05.
- 3. Supplies costs for future years exclude costs for the laptop, printer, and projector, which are one-time expenses.
- 4. Rental costs we project an increase of 3% for years 02 through 05.

FUNDING LIMITATIONS / RESTRICTIONS

Funding Limitation/Restriction

No more than 10 percent of the total grant award for each budget period may be used for data collection, performance measurement, and performance assessment, including incentives for participating in the required data collection follow-up.

	Year	1	Year 2	Yea	r 3	Year 4	Year 5	Total for Budget Category
A. Personnel		\$5,277	\$5,43	5	\$5,598	\$5,76	6 \$5,939	\$28,015
B. Fringe Benefits		\$1,406	\$1,40	3	\$1,448	\$1,44	8 \$1,448	\$7,156
C. Travel		\$150	\$15	0	\$150	\$15	0 \$150	\$750
D. Equipment								S
E. Supplies		\$400	\$40	0	\$400	\$40	0 \$400	\$2,000
F. Contractual		\$9,772	\$9,77	2	\$9,772	\$9,77	2 \$9,772	\$48,860
H. Other		\$2,000	\$2,00	0	\$2,000	\$2,00	0 \$2,000	\$10,000
I. Total Direct Charges (sum A to H)		\$19,005	\$19,16	3	\$19,368	\$19,53	6 \$19,709	\$96,781
J. Indirect Charges		\$802	\$82	1	\$846	\$86	6 \$886	\$4,221
TOTAL for the Budget Year		\$19,807	\$19,98	4	\$20,214	\$20,40	2 \$20,595	\$101,002
Percentage of the Budget		8.284%	8.3179	6	8.333%	8.346	8.358%	

Funding Limitation/Restriction Narrative:

The percentage of the budget that will be spent on data collection and performance measurement does not exceed 10% for any budget period. Maximum percentage for any budget period is 8.3% (\$19,807 / \$239,091 – Year 1).

The following expenses in our budget make up the costs shown for data collection and performance measurement activities:

Personnel and Fringe - approximately 10% of the Project Director and Program Coordinator's time will be spent overseeing data collection and performance measurement activities.

Travel - approximately 10% of staff's local travel costs.

Supplies - approximately 50% of the cost for copies.

Other - \$2,000 is the cost for client incentives for data collection follow-up (200 clients @\$10 each).

Contractual - \$9,772 is the total cost for the Evaluator who will be implementing data collection and reporting activities.

Indirect Charges - portion of IDC on the Personnel and Fringe costs.

BUDGET INFORMATION - Non-Construction Programs

OMB Number: 4040-0006 Expiration Date: 02/28/2022

SECTION A - BUDGET SUMMARY

Grant Program Function	Catalog of Federal Domestic Assistance	Estimated Uno	bligated Funds		New or Revised Budget	
or Activity (a)	Number (b)	Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
				<		
1.				\$239,091	\$0	\$239,091
				L Ollo		
				usil		
2.			KOK			
			CAIL			
3.		~~	011			
		5)				
		Oglo				
4.		× /				
	208					
5. Totals	210,3			\$239,091	\$0	\$239,091

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY Total				
	(1)		(3)	(4)	(5)
				(4)	
a. Personnel	\$52,765	\$0			\$52,765
b. Fringe Benefits	\$14,062	\$0	Sil		\$14,062
c. Travel	\$2,804	\$0			\$2,804
d. Equipment	\$0	\$0			\$0
e. Supplies	\$3,944	\$0			\$3,944
f. Contractual	\$101,197	\$0			\$101,197
g. Construction	\$0	\$0	\$0	\$0	\$0
h. Other	\$56,300	\$0			\$56,300
i. Total Direct Charges (sum of 6a-6h)	\$231,072	\$0			\$231,072
j. Indirect Charges	\$8,019	\$0			\$8,019
k. TOTALS (sum of 6i and 6j)	\$239,091	\$0			\$239,091
7. Program Income					
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SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources (e) TOTALS
8.			65
9.			050
10.			1119
11.			R
12. TOTAL (sum of lines 8-11)		,iO)	

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal			(5)		
14. Non-Federal					
15. TOTAL (sum of lines 13 and 14)					

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program		10	FUTURE FUNDING	PERIODS (YEARS)	
		(b) First	(c) Second	(d) Third	(e) Fourth
16.		\$240,285	\$242,583	\$244,464	\$246,402
17.	, 0				
18.	3				
19.	(0)				
20. TOTAL (sum of lines 16 - 19)		\$240,285	\$242,583	\$244,464	\$246,402

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:	e e	22. Indirect Charges:
23. Remarks:	190	

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