

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET
PERSONAL SERVICES DETAIL**

| A | B | C | D | E | F |
|--|--------------------------------|----------------------------|--------------------------|-------------------------|---------------------|
| POSITION TITLE | ANNUALIZED SALARY PER POSITION | STANDARD WORK WEEK (HOURS) | PERCENT OF EFFORT FUNDED | NUMBER OF MONTHS FUNDED | TOTAL |
| 1. Victim Services Coordinator | \$ 55,000.00 | 40.00 | 75.00% | 12 | \$ 41,250.00 |
| 2. Victim Services Advocate (MATCH - \$18,375) | \$24500.00 | 40.00 | 25.00% | 12 | \$6125.00 |
| 3. Volunteer/Intern (MATCH - \$12,250) | \$12250.00 | 30.00 | 0.00% | 12 | \$0.00 |
| 4. | | | 0.00% | | \$0.00 |
| 5. | | | 0.00% | | \$0.00 |
| 6. | | | 0.00% | | \$0.00 |
| 7. | | | 0.00% | | \$0.00 |
| 8. | | | 0.00% | | \$0.00 |
| 9. | | | 0.00% | | \$0.00 |
| 10. | | | 0.00% | | \$0.00 |
| 11. | | | 0.00% | | \$0.00 |
| 12. | | | 0.00% | | \$0.00 |
| 13. | | | 0.00% | | \$0.00 |
| 14. | | | 0.00% | | \$0.00 |
| 15. | | | 0.00% | | \$0.00 |
| Subtotal | | | | | \$ 47375.00 |
| G | FRINGE - TYPE/DESCRIPTION | | | | |
| SAMPLE VAP Fringe Rate 32% (MATCH - \$5,880) | | | | | \$15160.00 |
| PERSONAL SERVICES TOTAL | | | | | \$ 62,535.00 |

Contract Number: # C-000000

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET
NON-PERSONAL SERVICES DETAIL**

| H | CONTRACTUAL SERVICES - TYPE/DESCRIPTION | TOTAL |
|----------|---|-----------|
| 1. | Counseling - Group practice of mental health therapists | \$1950.00 |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| | TOTAL | \$1950.00 |

| I | TRAVEL - TYPE/DESCRIPTION | TOTAL |
|----------|---|-----------|
| 1. | Local and regional travel expenses for meeting and coalition attendance (MATCH - \$500) | |
| 2. | Statewide/National Conference, and local/regional training attendance | \$2000.00 |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| | TOTAL | \$2000.00 |

Contract Number: # C-000000

| J EQUIPMENT - TYPE/DESCRIPTION | | TOTAL |
|---------------------------------------|--|----------|
| 1. Computers (MATCH - \$200) | | \$400.00 |
| 2. Printers | | \$100.00 |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |
| TOTAL | | \$500.00 |

| K SPACE/PROPERTY EXPENSES: RENT - TYPE/DESCRIPTION | | TOTAL |
|---|--|-----------|
| 1. Office Rent: $\$27,950 * (2.5 \text{ FTE} / 10 \text{ Total FTE}) = \$6,987.50$ | | \$6987.50 |
| 2. Office Rent: $\$27,950 * (500 \text{ Occupied Sq Ft} / 10,000 \text{ Total Sq Ft}) = \$1,397.50$ | | |
| 3. | | |
| L SPACE/PROPERTY EXPENSES: OWN - TYPE/DESCRIPTION | | TOTAL |
| 1. | | |
| 2. | | |
| 3. | | |
| M TYPE/DESCRIPTION OF UTILITY EXPENSES | | TOTAL |
| 1. | | |
| 2. | | |
| 3. | | |
| TOTAL | | \$6987.50 |

Contract Number: # C-000000

| N OPERATING EXPENSES - TYPE/DESCRIPTION | TOTAL |
|---|----------|
| 1. Cellular phone | \$500.00 |
| 2. Printer/copier maintenance | \$250.00 |
| 3. Coalition and organizational memberships, and professional publication subscriptions | \$500.00 |
| 4. Advertising/printing | \$300.00 |
| 5. Office supplies | \$450.00 |
| 6. | |
| 7. | |
| 8. | |
| TOTAL | S2000.00 |

| O OTHER - TYPE/DESCRIPTION | TOTAL |
|----------------------------|-------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| TOTAL | S0.00 |