

**SAMPLE BUDGET FORM FOR ON-GOING COSTS  
4 Permanent Beds 4I Adult Residential Licensed Home**

The budget must demonstrate the financial aspects of the proposed resource. The projected costs cannot exceed 15% administrative overhead per WIC 4629.7

<u>ITEM</u>	<u>PROJECTED COST</u>
Residential Lease	_____
Maintenance	_____
Utilities	_____
Administrator/Staff Wages (specify details, i.e. starting wage)	_____
Staff Benefits (specify details)	_____
Payroll/Bookkeeping	_____
Staff Recruitment and Training	_____
Consultants Costs (specify)	_____
Office Equipment and Supplies	_____
Technology/Communications	_____
Program Supplies/Recreation & Adaptive Equipment	_____
Insurances	_____
Vehicle Lease and Maintenance	_____
Other General Expenses (specify details)	_____
<b>TOTAL PROJECTED MONTHLY ONGOING COSTS</b>	_____
<b>PROPOSED REIMBURSEMENT RATE PER PERSON</b>	_____

**In addition to the projected cost for each line item, please attach a separate sheet with a detailed breakdown of how each item was calculated.**