

EXHIBIT E

RFP BUDGET FORMAT

CONTRACT PERIOD: October 1, 2015 - September 30, 2016

CONTRACT BUDGET: \$

EIN NUMBER: #

	A	B	C	D
CATEGORY OF COST	CDBG NAC PROGRAM	OTHER PROJECT RESOURCES	TOTAL RESOURCES A+B	AGENCY ITEM LINE BUDGET
I. OPERATING BUDGET				
A. DIRECT PERSONNEL	\$	\$	\$	\$
B. DIRECT FRINGE BENEFITS	\$	\$	\$	\$
C. OPERATING CONSULTANTS	\$	\$	\$	\$
D. TRAVEL - LOCAL	\$	\$	\$	\$
E. TRAVEL - OUT OF TOWN	\$	\$	\$	\$
F. OCCUPANCY	\$	\$	\$	\$
G. CONSUMABLE SUPPLIES	\$	\$	\$	\$
H. EQUIPMENT - LEASE	\$	\$	\$	\$
I. EQUIPMENT - MAINTENANCE	\$	\$	\$	\$
J. EQUIPMENT - PURCHASE	\$	\$	\$	\$
K. INSURANCE	\$	\$	\$	\$
CONTRACT TOTAL*	\$	\$	\$	\$

INSTRUCTIONS: Enter the dollar amounts on the Budget Detail pages only (pages 2 and 3). Do not type any data on the Summary page (page 1); the Summary page will automatically capture the data entered.

Budgets should reflect all costs required to operate the program you are proposing. Under the Personnel cost category, list the title of the staff person(s) you are seeking to fund (no personal names). FICA budgeted items should reflect 7.65% of the personnel salary costs listed in the budget. If selected for funding, appropriate procurement documentation will be reviewed at contract start.

Funding: Enter CDBG funding sought in Column A, other funding with you anticipate in Column B, and the Agency Line expenses in Column (D). If your agency anticipates funding from other resources for housing counseling (ie. HUD, PHFA, Neighborworks, NCLR, etc.), use Column (B). Do not enter data in Column (C), as it will be entered automatically. Please identify the sources of funding for Column (B) in the last page, Other Project Resources.

BUDGET DETAIL

	A	B	C	D
CATEGORY OF COST	CDBG NAC PROGRAM	OTHER PROJECT RESOURCES	TOTAL RESOURCES A+B	AGENCY ITEM BUDGET
I. OPERATING BUDGET				
A. DIRECT PERSONNEL				
1. Executive Director	\$	\$	\$	\$
2. Project Coordinator	\$	\$	\$	\$
3.	\$	\$	\$	\$
4.	\$	\$	\$	\$
5. Admin Assistant	\$	\$	\$	\$
6. Other	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$
B. DIRECT FRINGE BENEFITS				
1. FICA - Employer's Contribution	\$	\$	\$	\$
2. Workman's Compensation	\$	\$	\$	\$
3. Unemployment	\$	\$	\$	\$
4. Medical/ Dental	\$	\$	\$	\$
5. Life/Disability	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$
C. OPERATING CONSULTANTS				
1. Accounting	\$	\$	\$	\$
2.	\$	\$	\$	\$
3. Legal	\$	\$	\$	\$
4.	\$	\$	\$	\$
5. Audit	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$
D. TRAVEL - LOCAL	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$
E. TRAVEL - OUT OF TOWN	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$
BUDGET				

DETAIL

	A	B	C	D
CATEGORY OF COST	CDBG NAC PROGRAM	OTHER PROJECT RESOURCES	TOTAL RESOURCES A+B	AGENCY ITEM BUDGET
F. OCCUPANCY				
1. Utilities	\$	\$	\$	\$
2. Telephone	\$	\$	\$	\$
3. Rent	\$	\$	\$	\$
4. Custodial	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$
G. CONSUMABLE SUPPLIES				
1. Office Supplies	\$	\$	\$	\$
2. Postage	\$	\$	\$	\$
3. Printing	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$
H. DIRECT LEASE/RENTAL OF EQUIPMENT/FURNISHINGS				
1. Copy Machine	\$	\$	\$	\$
2.	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$
I. EQUIPMENT REPAIR / MAINTENANCE				
	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$
J. EQUIPMENT - PURCHASE				
	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$
K. INSURANCE				
1. Liability	\$	\$	\$	\$
2. Fidelity Bonding	\$	\$	\$	\$
3. General	\$	\$	\$	\$
SUBTOTAL	\$	\$	\$	\$

BUDGET

DETAIL

Other Project Resources

<u>Funding Source</u>	<u>Amount of Funding</u>
1.	\$ -
2.	\$ -
3.	\$ -
Total	\$ -

The City minimum wage effective 1/2015 is \$12 hour for nonprofits with City of Philadelphia contracts. The nonprofit must have more than five employees and hold City funded contracts totaling \$100,000 in the given City fiscal period.