Instructions for Budget Forms
FY 2011 – 2012
BUDGET SUMMARY PAGE

Budget Summary - The required fields to be completed are:
- Agency Name
- Agreement Period
- Project Name
- Fiscal Contact Person
- Agency Authorized Signatures
- Phone Number

*** First 5 LA Funds, Matching Funds (if applicable), Total Cost for each line item cost category are linked from the individual worksheets.

Section 1 – Personnel

Include personnel that will be assigned to the First 5 LA program. List each employee individually.

- **Title/Name** – this box should contain the name and the title of the employee. If no person has been assigned, please indicate by noting: TBH (To Be Hired) or TBD (To Be Determined).

- **Full-Time/Part-Time (FT/PT)** – please indicate if the individual is a part-time or full-time employee of the agency.

- **Gross Monthly Salary** – provide the agency monthly gross salary for each position (as reflected on Payroll Register).
  - Executive positions may not exceed 60% of their gross salaries and should be in proportion to the total First 5 LA grant in relation to the entire agency’s revenue, in which case the lesser will apply.
  - If an agency has multiple grants with First 5 LA, the 60% applies to all First 5 LA combined grants.

For Example:
- If the First 5 LA grant represents 10% of your agency’s revenue, executive positions are ONLY reimbursable at 10% of their gross salary.
- If the First 5 LA grant represents 75% of your agency’s revenue, executive positions are ONLY reimbursable at 60% of their gross salary.

- **Percentage (%) of Time on First 5 LA Project** – this box should contain the percentage of time that the employee will be allocated to the First 5 LA Program (reflected on Timesheets)
• **Months to be Employed** – list the number of months this person will be employed assigned to First 5 LA program

• **Fringe Benefits** – Refer to agency’s benefit package to calculate fringe benefits.

### Section 2 – Contracted Services

Include contractors/consultants that will be used to support the services provided by the program. Include a brief description of the services, rate of pay and the formula to determine the total amount.

**Do not include costs for consultants that deal directly with the Evaluation. (Use Section 11 of Budget Form)**

### Section 3 – Equipment

If the budget calls for equipment purchases, it should be strictly for **First 5 LA use ONLY**. Describe the equipment that will be purchased during the agreement period. Provide the quantity, cost per unit, and identify the purpose and the individuals who will be using the equipment.

### Section 4 – Printing/Copying

Provide a brief description of the general printing cost associated to the program.

### Section 5 & 6 – Space & Telephone

- **Space** – On the top table, include cost associated for space used for the program. Provide footage, cost per foot (rent/lease/mortgage), and number of months the space will be used.

  * Applies to agencies that pay for Rent/Lease or Mortgage. (Copy of rent/lease agreement or mortgage payment may be requested by First 5 LA)

- **Telephone** – On the bottom table, include telephone cost associated to First 5 LA program. Provide the total number of telephones, cost per telephone, and the number of months the telephones will be used.
Section 7 & 8 – Postage & Supplies

- **Postage** – On the top table, include cost of postage associated to First 5 LA program. Provide the quantity, unit cost, and number of months that the postage costs will be used.

- **Supplies** – On the bottom table, include cost of supplies required for First 5 LA program. Provide a general description, quantity, unit cost (or monthly cost) and the number of months.

Section 9 & 10 – Employee Mileage/Travel & Training

- **Employee Mileage/Travel** – On the top table, include a general description of the mileage/travel expense, include the rate of reimbursement.

- **Training** – On the bottom table, include a general description of the training, cost of training and number of person that will be trained.

Section 11 – Evaluation

- **Evaluation Contracted Services** – provide the name of the evaluation agency/or the evaluator, a general description of the evaluation services, rate of pay and the formula used to determine the total amount.

* If the evaluation is being conducted in-house (agency staff), please list under Section 1 – Personnel, and identify them as (Evaluation)

- **Other Evaluation Cost** – Include other expense related to evaluation only.

Section 12 & 13 – Other Expenses & Indirect Costs

- **Other Expenses** – Include other expenses associated to First 5 LA program not listed in other categories. (Provide a general description of all other expenses.)

- **Indirect Costs** – Include overhead and administrative cost associated with First 5 LA program. Indirect Cost **CANNOT** exceed 10% of Total Personnel Cost **excluding Fringe Benefits**
HELPFUL HINTS

✓ Make sure to list each employee by name on Section 1 - Personnel

✓ Gross Monthly Salary must be comparable with agency’s Payroll Register (being tested at end of grant year during fiscal compliance review/audit)

✓ When budgeting for Personnel Cost, consider any salary increase (i.e., Cost of Living, Labor Union, etc.) that may happen during the grant year.

✓ When budgeting for Personnel Cost, consider the months with 3 pay-periods to cover your full year of personnel costs.

✓ Compare cost per category on the budget summary against individual worksheet.

✓ Review formulas to ensure their validity. If necessary over write formulas.

✓ Make sure that ONLY authorized representative of the agency (i.e., Executive Director) signs the budget summary page.

✓ Include the fiscal contact name and phone number

✓ DO NOT include rollover/roll-forward amounts when submitting a new budget for a new grant agreement period.