

# CITY OF MILWAUKEE OPERATING GRANT BUDGET

**INSTRUCTIONS:** *Fill in all RED text, and convert to BLACK. Delete red items that are not needed. Yellow highlighted cells include formulas to automatically total dollar amounts. If you insert additional rows, copy down the formulas into the inserted rows. Make sure to check the formulas to ensure they are calculating the numbers correctly.*

**PROJECT/PROGRAM TITLE:** Breastfeeding Peer Counseling Grant (GR3801125400 )

**PROJECT/PROGRAM YEAR:** 2025

**CONTACT PERSON:** [Sarah DeSmidt] \ [6732]

**DEPT:** HEALTH

NUMBER OF POSITIONS		LINE DESCRIPTION	FTE	PAY RANGE	GRANTOR SHARE	[MHD PGM CODE]	[MHD PGM CODE]	TOTAL
NEW	EXISTING					IN-KIND & CITY SHARE	CASH MATCH AC#	
		<b>PERSONNEL COSTS (TOTAL .15 FTE)</b>						
	1	[Health Project Supervisor] (Gonwa Ramos)	0.15	IGX	13,544			\$13,544
		<b>TOTAL PERSONNEL COSTS</b>			\$13,544			\$13,544
		<b>FRINGE BENEFITS (2024 @ 46.75%)</b>			6,332			\$6,332
		<b>TOTAL FRINGE BENEFITS</b>			\$6,332			\$6,332
		<b>OPERATING EXPENDITURES</b>						
		Contract services (temp staff, interpreters, etc.) - 634001			144,444			\$144,444
		Internet/Telephone 635002			2,100			\$2,100
		Travel and Training-636501			500			\$500
		<b>TOTAL OPERATING EXPENDITURES</b>			\$147,044			\$147,044
		<b>EQUIPMENT</b>						
		<b>TOTAL EQUIPMENT</b>						
		<b>INDIRECT COSTS</b>						
		<b>TOTAL INDIRECT COSTS</b>						
	1	<b>TOTAL POSITIONS / FTE / COSTS</b>	0.15		\$166,920			\$166,920