

## CITY OF MILWAUKEE OPERATING GRANT BUDGET

PROJECT/PROGRAM TITLE: Hepatitis B Immunization Grant  
 CONTACT PERSON: Marisa Stanley, X6270

PROJECT/PROGRAM YEAR:

NUMBER OF POSITIONS		LINE DESCRIPTION	PAY RANGE NO.	GRANTOR SHARE	IN-KIND SHARE	CASH MATCH A/C #
NEW	EXISTING					
		<b>PERSONNEL COSTS</b>				
	1	Health Interpreter Aide (X) (HH) (DD)	5AN	10,000		
		<b>TOTAL PERSONNEL COSTS</b>		<b>10,000</b>		
		<b>FRINGE BENEFITS</b>				
		45%		4,500		
		<b>TOTAL FRINGE BENEFITS</b>		<b>4,500</b>		
		<b>SUPPLIES AND MATERIALS</b>				
		Office Supplies				
		<b>TOTAL SUPPLIES AND MATERIALS</b>		<b>0</b>		
		<b>SERVICES</b>				
		Auto Allowance		500		
		<b>TOTAL SERVICES</b>		<b>500</b>		
		<b>TOTAL COSTS</b>		<b>15,000</b>	<b>0</b>	<b>0</b>

2015

TOTAL
10,000
<b>10,000</b>
4,500
<b>4,500</b>
0
0
<b>0</b>
500
0
<b>500</b>
<b>15,000</b>