

CITY OF MILWAUKEE OPERATING GRANT BUDGET

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

PROJECT/PROGRAM TITLE: STI Infertility/PCHD GR38004-
CONTACT PERSON: Naomi Jenkins x6318

PROJECT/PROGRAM YEAR: 2026
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#	
		PERSONNEL COSTS (TOTAL 1.0 FTE)						
	1	Disease Intervention Specialist 3 (Bennett, 50%)	0.50	2FN	30,000			\$30,000
	1	Disease Intervention Specialist 3 (Bradley, 50%)	0.50	2FN	31,500			\$31,500
		TOTAL PERSONNEL COSTS			\$61,500			\$61,500
		FRINGE BENEFITS (2026 @ 52.20%)			32,103			\$32,103
		TOTAL FRINGE BENEFITS			\$32,103			\$32,103
		OPERATING EXPENDITURES						
		Supplies			133			\$133
		TOTAL OPERATING EXPENDITURES			\$133			\$133
		EQUIPMENT						
		TOTAL EQUIPMENT						
		INDIRECT COSTS						
		TOTAL INDIRECT COSTS						
	2	TOTAL POSITIONS / FTE / COSTS	1.00		\$93,736			\$93,736