CITY OF MILWAUKEE OPERATING GRANT BUDGET

NOTE: The highlighted cells include formulas to automatically total dollar amounts. If you insert additional rows, you may need to copy the formulas into the inserted rows. Make sure to check the formulas to ensure they are calculating the numbers correctly.

PROJECT/PROGRAM TITLE:	Communicable Disease Prevention	PROJECT/PROGRAM YEAR:	2020-2021
CONTACT PERSON:	Lindsey Page		

NUMBER C	OF POSITIONS	1	PAY			<u> </u>	
	T	1	RANGE/	GRANTOR	IN-KIND	CASH MATCH	
NEW	EXISTING	LINE DESCRIPTION	UNITS	SHARE	SHARE	A/C #	TOTAL
		PERSONNEL COSTS					
		TOTAL PERSONNEL COSTS					
		FRINGE BENEFITS					
		TOTAL FRINGE BENEFITS					
		OPERATING EXPENDITURES					
		TOTAL OPERATING EXPENDITURES					
		TRAININGS AND PROFESSIONAL DEVELOPMENT					
		Trainings		\$5,000			\$5,000
		TOTAL TRAININGS/PROFESSIONAL DEVELOPEMTN		\$5,000			\$5,000
		EQUIPMENT					
		Refrigerators/Freezers for Immunizations		\$15,000			\$15,000
		TOTAL EQUIPMENT		\$15,000			\$15,000
		CONTRACTUAL SERVICES					
		STI Strategic Planning		\$8,000			\$8,000
		TOTAL CONTRACTUAL SERVICES		\$8,000			\$8,000
		INDIRECT COSTS					

	TOTAL INDIRECT COSTS			
	TOTAL COSTS	\$28,000		\$28,000