

Grantee Name: <i>Healthy Youth Clinic (HYC)</i>		Project Number: <i>Insert the Application Number followed by the project Number (i.e., xxxx-xx)</i>		Note
<i>NOTE: Certain Federal assistance programs require additional computations to arrive at the Federal share of project costs eligible for participation. If such is the case, you will be notified.</i>		OMB Approval No. 0348-0041		
<b>BUDGET INFORMATION - Construction Programs</b>				
<b>COST CLASSIFICATION</b>	a. Total Cost	b. Costs Not Allowable for Participation	c. Total Allowable Costs (Columns a-b)	
<b>1 Administrative and legal expenses</b>	\$33,100.00	\$0.00	\$33,100.00	
<b>2 Land, structures, rights-of-way, appraisals, etc.</b>	\$0.00	\$0.00	\$0.00	
<b>3 Relocation expenses and payments</b>	\$3,000.00	\$3,000.00	\$0.00	
<b>4 Architectural and engineering fees</b>	\$39,000.00	\$0.00	\$39,000.00	
<b>5 Other architectural and engineering fees</b>	\$0.00	\$0.00	\$0.00	
<b>6 Project inspection fees</b>	\$12,000.00	\$0.00	\$12,000.00	
<b>7 Site work</b>	\$8,000.00	\$0.00	\$8,000.00	
<b>8 Demolition and removal</b>	\$10,000.00	\$0.00	\$10,000.00	
<b>9 Construction</b>	\$390,500.00	\$100,000.00	\$290,500.00	
<b>10 Equipment</b>	\$61,000.00	\$0.00	\$61,000.00	
<b>11 Miscellaneous</b>	\$0.00	\$0.00	\$0.00	
<b>12 SUBTOTAL</b>	\$556,600.00	\$103,000.00	\$453,600.00	
<b>13 Contingencies</b>	\$20,425.00	\$0.00	\$20,425.00	
<b>14 SUBTOTAL</b>	\$577,025.00	\$103,000.00	\$474,025.00	
<b>15 Project (program) income (NOT APPLICABLE)</b>	\$0.00	\$0.00	\$0.00	
<b>16 TOTAL PROJECT COSTS (subtract #15 from #14)</b>	\$577,025.00	\$103,000.00	\$474,025.00	
FEDERAL FUNDING				
<b>17 Federal Assistance Requested</b>	Federal percentage share (automatically calculated 17c / 16c):	95%	\$450,000.00	<i>Enter the total Federal amount for this project.</i>