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**Appendix F**

**Cost Reimbursement Budget and Budget Narrative**

**Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ITN #015 – MRT for Miami-Dade County**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | CONTRACTED |  |
| LINE ITEMS |  | AMOUNTS | TOTAL |
|  |  |  |  |
| I. PERSONNEL SERVICES | |  |  |
| (a) SALARIES | |  |  |
| (b) FRINGE | |  |  |
|  | **TOTAL PERSONNEL =** | $ - |  |
|  |  | ========== | ========== |
| II. EXPENSES | |  |  |
| (a) BUILDING OCCUPANCY | |  |  |
| (b) PROFESSIONAL SERVICES | |  |  |
| (c) TRAVEL | |  |  |
| (d) EQUIPMENT COSTS | |  |  |
| (e) FOOD SERVICES | |  |  |
| (f) MEDICAL AND PHARMACY | |  |  |
| (g)SUBCONTRACTED SERVICES | |  |  |
| (h)INSURANCE | |  |  |
| (i) INTEREST | |  |  |
| (j) OPERATING SUPPLIES & EXPENSES | |  |  |
| (k) OTHER/Training | | $ - |  |
| (l) DONATED ITEMS | | $ - |  |
|  | **TOTAL EXPENSES =** | $ - | $ - |
|  |  | ========== | ========== |
|  |  |  |  |
| III. NONEXPENDABLE PROPERTY | |  |  |
| (a) EQUIPMENT | |  |  |
| (b) PROPERTY | | $ - |  |
|  | **TOTAL NONEXPENDABLE PROPERTY =** |  | $ - |
|  |  | ========== | ========== |
|  |  |  |  |
| IV. COMPUTER HARDWARE, SOFTWARE, | |  |  |
| & SERVICES | |  |  |
|  | **TOTAL COMPUTER EXPENSES =** |  |  |
|  |  | ========== | ========== |
|  |  |  |  |
| V. ADMINISTRATION | |  |  |
|  |  | ========== | ========== |
|  |  |  |  |
|  | **GRAND TOTAL =** |  |  |
|  |  | ========== | ========== |
|  |  |  |  |

**Applicant:**

**ITN #015 – MRT for Miami-Dade County**

**Budget Details:**

1. Personnel:

2. Fringe Benefits:

3. Building Occupancy:

4. Professional Services:

5. Travel:

6. Equipment Cost:

7. Food Services:

8. Medical and Pharmacy:

9. Subcontracted Services:

10. Insurance:

11. Interest:

12. Operating Supplies and Expenses:

13. Other:

14. Donated items:

15. Non Expendable Property:

16. Computer Hardware, Software and Services:

17. Administration:

**Budget Narrative**

**Instructions for Completing the Budget Narrative**

Attach, in narrative form, an explanation and justification of all line-items listed using the following guidelines:

**1. Personnel:**

1. List each position that will work on the contract with position title and description.
2. List salary paid, for each position, from this contract.
3. Enter the total amount of personnel costs.

**2. Fringe Benefits:**

1. List fringe benefits separately (i.e., FICA, Worker’s Compensation, Unemployment Compensation, Health Insurance, etc.)
2. List total amount paid by applicant for each type of fringe benefit.

**3. Building Occupancy:**

Explain what the space will be used for and why it is necessary for the contract. Copies of lease agreements or proof of purchase may be required. If the building is not owned by the applicant, enter the lease or ownership cost (depreciation plus general liability insurance) or rent. If depreciation is not booked, the applicant may enter the prorated cost of space based on its use allowance (not to exceed two percent of the cost of acquisition) or develop and submit an inventory of assets showing cost, date of purchase, general condition, etc. Depreciation methodology of assets not consistent with IRS guidelines must be explained in the narrative.

**4. Professional Services:**

Explain in full the purpose and necessity of consultants or other professional staff.

**5. Travel:**

Explain who will be traveling, where they will be traveling and for what purpose, this includes travel to conferences. Expenditures properly chargeable to travel include registration payments, reimbursements of mileage for use of a privately-owned vehicle, per diem and subsistence allowance, common carrier transportation and other expenses incidental to travel which are authorized by law. Section 112.061, F.S. and Rule 69I-42 F.A.C. govern travel expenses.

Reimbursement rates of mileage for use of a privately-owned vehicle cannot exceed allowable rates paid by Thriving Mind South Florida (44.5 cents per mile).

**6. Equipment Cost:**

Explain the need for equipment. Copies of leases or rental agreements or proof of purchase will be required. Include equipment maintenance agreements and cost. Refer to the Reference Guide for State Expenditure for allowability.

The Reference Guide for State Expenditure can be located by clicking on the following link:

<https://www.flrules.org/gateway/readRefFile.asp?refId=11851&filename=1%20Ref%20Guide%20for%20State%20Expenditures.pdf>

**7. Food Services:**

Indicate what types of services are being provided by whom (contract, agency, etc.), and to whom.

**8. Medical and Pharmacy:** Describe how these services are provided and how cost is determined.

**9. Subcontracted Services:**

Justify services provided under subcontracts and explain why they cannot be performed by existing agency staff. Explain if you will be subcontracting based on unit cost or line- item budget. All requests to subcontract must be approved by Thriving Mind prior to their effective date.

**10. Insurance:**

List types of insurance needed and explain need for each. Proof of insurance will be required. Employee health insurance must not be listed here (list in Fringe Benefits).

**11. Interest:**

List all interest costs, their expected duration and justify each.

**12. Operating Supplies and Expenses:**

List basic categories of normal office expenses (i.e. telephone, postage, utilities, etc.) It is not necessary to justify those which are self-explanatory. Justify any exceptional amounts.

**13. Other:**

Include any expected costs not listed above. Provide full justification for each.

**14. Donated items:**

Include items here that you expect to receive as donations, (i.e. space, supplies, equipment, etc.) Explain how donated items will be used to meet contract objectives and/or reduce costs.

**15. Non-Expendable Property:**

List all items to be purchased under this contract. Explain the need for each item and describe how it will be used. Purchases exceeding $500 must be inventoried. An inventory listing of items purchased by this project will be required. Applicant should verify with Thriving Mind South Florida if specific OCO items to be purchased for this project are allowable.

**16. Computer Hardware, Software and Services:**

When acquiring computer hardware, software and services, regardless of cost, the applicant agrees to obtain prior written authorization and to follow the Department of Children and Families and the State Technology Office’s Information Technology Resource purchasing procedures.

**17. Administration:**

Indicate briefly what costs by type you have included in administration.

All proposed costs must be in accordance with the Department of Financial Services Reference Guide for State Expenditures, July 2014, or the latest revision thereof, which may be located at: [**http://www.flrules.org/Gateway/reference.asp?No=Ref-04201**](http://www.flrules.org/Gateway/reference.asp?No=Ref-04201)

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