

Attachment I
 APPENDIX E - SOQ APPLICATION
 EXHIBIT 7 - DVSBP SOQ ANNUAL CONTRACT BUDGET

ANNUAL LINE ITEM BUDGET

PROJECT NAME: DOMESTIC VIOLENCE SHELTER-BASED PROGRAM

CONTRACTOR: _____

CONTRACT PERIOD: July 1, 2013 - June 30, 2018

DIRECT COSTS

		12-Month Cost
Staff (Personnel Schedule A)		
Salaries	a	
Benefits	b	
Total	c = a + b	
Operating Costs		
Computer, Printer & Software	f	
Equipment	g	
Maintenance	h	
Mileage	i	
Office Supplies	j	
Postage	k	
Printing	l	
Legal Fees	m	
Rent	n	
Utilities	o	
Telephone	p	
Dues & Memberships	q	
Licenses/Permits/Fees	r	
Consultants/Professional fees	s	
Liability & other insurance	t	
Rent/storage	u	
Personnel Advertising	v	
Conferences/Meetings	w	
Staff Training	x	
Total	y = add f thru x	
Total Direct Costs	aa = c + y	

INDIRECT COSTS

Indirect Costs (rate = _____%) _____

TOTAL _____

ANNUAL PERSONNEL SCHEDULE

Schedule A, Page 1

CONTRACTOR: _____

CONTRACT PERIOD: 7/1/13-6/30/18

Employee Name ¹	Payroll Title	Classification	Number of Positions	Monthly or Hourly Salary	% Time Allocation	Total Monthly Cost	12-Month Cost
SUBTOTAL SALARIES							

MONTHLY EMPLOYEE BENEFITS BY CLASSIFICATION					From Other Personnel Schedules	12-Month Cost
Health Plan						
Dental Plan						
Retirement						
SUI						
Social Security						
Worker's Compensation:						
Long-Term Disability						
Holidays						
Sick Leave						
Vacation						
Life Insurance						
Fringe Benefits per Classification						
Subtotal	a					
Total # of Positions by Classification	b					
TOTAL EMPLOYEE BENEFITS	c = a X b					
					Monthly	12-Month Cost

Footnotes

¹ Do not utilize Employee's full name. Utilize Employee's First Initial and Year of Birth. State expected filling date for a vacant position. Add more schedules if needed.

ANNUAL COMPUTER EQUIPMENT SCHEDULE

PROJECT NAME: DOMESTIC VIOLENCE SHELTER-BASED PROGRAM

CONTRACTOR: _____

CONTRACT PERIOD: July 1, 2013 - June 30, 2018

Description	Quantity	Unit Cost	Total Cost

TOTAL

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DPSS Approval or Denial (Circle one)

Name	_____	Remark	_____
Signature	_____		
Title:	_____		
Date:	_____		

ANNUAL BUDGET NARRATIVE

Complete a budget narrative for each separate line item in the budget.

PROJECT NAME: DOMESTIC VIOLENCE SHETLER-BASED PROGRAM SERVICES

CONTRACTOR: _____

CONTRACT PERIOD: July 1, 2013 - June 30, 2018

Staff Salaries	_____	_____
Benefits	_____	_____
Operating Costs	_____	_____
Computer, Printer, Software	_____	_____
Equipment	_____	_____
Maintenance	_____	_____
Mileage	_____	_____
Office Supplies	_____	_____
Postage	_____	_____
Printing	_____	_____
Legal Fees	_____	_____
Rent	_____	_____
Utilities	_____	_____
Telephone	_____	_____
Dues and Memberships	_____	_____
Licenses, permits, fees	_____	_____
Consultants/Professional Fees	_____	_____
Liability and other Insurance	_____	_____
Rent/Storage	_____	_____
Personnel Advertising	_____	_____
Conferences/Meetings	_____	_____
Staff Training	_____	_____
Indirect Costs	_____	_____
	Annual Total Operating Costs	=====