

**FLORIDA COALITION AGAINST DOMESTIC VIOLENCE**  
**2014/2015 TOTAL AGENCY BUDGET SUMMARY ENTERED BY**  
**PERCENTAGE**

<b>Provider Name:</b>
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Description	VAWA/STOP	Other	Total Funding
A. Wages/Salaries	\$0.00	\$0.00	\$0.00
B. Fringe Benefits	\$0.00	\$0.00	\$0.00
C. Staff Travel	\$0.00	\$0.00	\$0.00
D. Contracted Services	\$0.00	\$0.00	\$0.00
E. Subcontracted Services	\$0.00	\$0.00	\$0.00
F. Participant Program Services	\$0.00	\$0.00	\$0.00
G. Office Expenses	\$0.00	\$0.00	\$0.00
H. Equipment (Inventory)	\$0.00	\$0.00	\$0.00
I. Rental or Use of Space	\$0.00	\$0.00	\$0.00
J. Rental of Equipment	\$0.00	\$0.00	\$0.00
K. Insurance	\$0.00	\$0.00	\$0.00
L. Membership Fees & Subscriptions	\$0.00	\$0.00	\$0.00
M. Advertising	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00
FCADV GRANT AWARD			\$0.00
FCADV PROJECT MATCH			

INSTRUCTIONS: 2014/2015 TOTAL AGENCY BUDGET SUMMARY

The 2014/2015 Total Agency Budget Summary page reflects your total agency budget including all costs which will be paid by FCADV.

1. Enter information into WHITE CELLS ONLY on each applicable line item page.
2. Follow the instructions listed for each line item as attached.
3. Include your justification narrative for each line item.
4. Information included on the attached line item pages will carry forth to this 2014/2015 Total Agency Budget Summary page.

## 2014/2015 FCADV Budget

[illegible]

### Wages/Salaries Narrative Justification

Complete your salary/wages narrative justification description on the next page

**2014/2015 FCADV Wages/Salaries Narrative**  
**Provider Name:**

## 2014/2015 FCADV Budget

[illegible]

### **Fringe Benefits Narrative Justification**

Complete your fringe benefits narrative justification description on the narrative fringe page. Report total benefits amount by position. Two narrative forms are attached. If you don't do the column form see sample.

Example: Project Coordinator – Salary \$45,000

Retirement 5% of \$45,000	2250
FICA 7.65% of \$45,000	3443
Insurance \$2,000/year	2000
Workers' Comp .05% of \$45,000	23
Total	7716

## 2014/2015 FCADV Budget

**Provider Name:**[illegible]

**2014/2015 FCADV Fringe Benefits Narrative**  
**Provider Name:**

## 2014/2015 FCADV Budget

[illegible]

### Staff Travel Narrative Justification

Complete your staff travel narrative justification description on the next page.

Example of staff travel: mileage, hotel, meals, rental cars, air fare, etc.

## STOP Training Conference

1 trip x 2 people x 500 miles @

2 days meals allowance x \$21.

1 night lodging x \$99/night x 2

TOTAL Trip

**PLEASE NOTE** Training attended using STOP funds must be OVW sponsored

The Project Coordinator and the Outreach Specialist will travel to (location) to attend a TANF Training Conference

The Project Coordinator will make an estimated 25 trips to local outreach sites to provide participant assistance

**2014/2015 FCADV Staff Travel Narrative**  
**Provider Name:**



## 2014/2015 FCADV Budget

D. Contracted Services		VAWA/STOP		Other		Total Funding	
Contracted Service	Annual Dollar	%	Amount	%	Amount	%	Amount
Program:							
Percentage	\$0.00	0%	\$0.00	0%	\$0.00	0%	\$0.00
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### Contracted Services Narrative Justification

Complete your contracted services narrative justification description on the next page.

Examples of contracted services: maintenance agreements on copiers, human resources outsourcing company, payroll processing company fees, independent auditor (if state OR federal dollars exceed \$500,000), etc.

**2014/2015 FCADV Contracted Services Narrative**  
**Provider Name:**

## 2014/2015 FCADV Budget

E. Subcontracted Services		VAWA/STOP		Other		Total Funding	
Contracted Service	Annual Dollar	%	Amount	%	Amount	%	Amount
Program:							
Percentage	\$0.00	0%	\$0.00	0%	\$0.00	0%	\$0.00
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### Subcontracted Services Narrative Justification

Complete your subcontracted services narrative justification description on the next page.

Examples of subcontracted services: maintenance agreements on copiers, human resources outsourcing company, payroll processing company fees, independent auditor (if state OR federal dollars exceed \$500,000), etc.

**2014/2015 FCADV Subcontracted Services Narrative**  
**Provider Name:**

## 2014/2015 FCADV Budget

[illegible]

### Participant Program Services Narrative Justification

Complete your participant program services narrative justification description on the next page.

**2014/2015 FCADV Participant Program Services Narrative**  
**Provider Name:**

## 2014/2015 FCADV Budget

[illegible]

### Office Expense Narrative Justification

**Office Expense Narrative Justification**  
Complete your office expenses narrative justification description on the next page.

**2014/2015 FCADV Office Expense Narrative**  
**Provider Name:**



## 2014/2015 FCADV Budget

[illegible]

## Equipment Expenses Narrative Justification

Complete your equipment expenses narrative justification description on the next page.

**ALL IRR and Services require and ITR form to be completed, submitted and approved before**

**2014/2015 FCADV Equipment Narrative**  
**Provider Name:**

## 2014/2015 FCADV Budget

[illegible]

### Rental or Use of Space Narrative Justification

Complete your Rental of Space Narrative justification description on the next page.

**2014/2015 FCADV Budget**  
**Provider Name:**

## 2014/2015 FCADV Budget

J. Rental of Equipment			VAWA/STOP		Other		Total Funding	
Rental of Equipment	Annual Dollar Amount		%	Amount	%	Amount	%	Amount
Program:								
Percentage	\$0.00	0%	\$0.00	0%	\$0.00	0%	\$0.00	\$0.00
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### Rental of Equipment Narrative Justification

Complete your equipment rental narrative justification description on the next page.

**2014/2015 FCADV Rental of Equipment Narrative**  
**Provider Name:**

2014/2015 FCADV Budget

K. Insurance		VAWA/STOP		Other		Total Funding		
Insurance	Annual Dollar Amount	%	Amount	%	Amount	%	Amount	
Program:								
Percentage		\$0.00	0%	\$0.00	0%	\$0.00	0%	\$0.00
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**Insurance Narrative Justification**  
Complete your business insurance narrative justification description on the next page.

**2014/2015 FCADV Insurance Narrative**  
**Provider Name:**



## 2014/2015 FCADV Budget

L. Membership Fees & Subscriptions			VAWA/STOP		Other		Total Funding	
Membership Fees & Subscriptions	Annual Dollar Amount		%	Amount	%	Amount	%	Amount
Program:								
Percentage	\$0.00	0%	\$0.00	0%	\$0.00	0%	\$0.00	
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### Membership Fees & Subscriptions Narrative Justification

Complete your membership fees & subscription narrative justification description on the next page.

**2014/2015 FCADV Membership Fees & Subscriptions Narrative**  
**Provider Name:**

## 2014/2015 FCADV Budget

[illegible]

## Advertising Narrative Justification

Complete your advertising expense narrative justification description on the next page.

**2014/2015 FCADV Advertising Narrative**  
**Provider Name:**

## 2014/2015 FCADV Budget

In Kind Match	VAWA/STOP	Match Funding Source	Other	Match Funding Source	Total Match
A. Wages/Salaries					\$0.00
B. Fringe Benefits					\$0.00
C. Staff Travel					\$0.00
D. Contracted Services					\$0.00
E. Subcontracted Services					\$0.00
F. Participant Program Services					\$0.00
G. Office Expenses					\$0.00
H. Equipment (Inventory)					\$0.00
I. Rental or Use of Space					\$0.00
J. Rental of Equipment					\$0.00
K. Insurance					\$0.00
L. Membership Fees & Subscriptions					\$0.00
M. Advertising					\$0.00
<b>Total Expenditures</b>	<b>\$0.00</b>		<b>\$0.00</b>		<b>\$0.00</b>

In Kind match amounts are included in Total Agency Budget Summary page.

### In Kind Match Narrative Justification

Complete your in kind match justification description on the next page.

**2014/2015 FCADV In Kind Match Narrative**  
**Provider Name:**

2014/2015 FCADV Budget					
Cash Match	VAWA/STOP	Match Funding Source	Other	Match Funding Source	Total Match
A. Wages/Salaries					\$0.00
B. Fringe Benefits					\$0.00
C. Staff Travel					\$0.00
D. Contracted Services					\$0.00
E. Subcontracted Services					\$0.00
F. Participant Program Services					\$0.00
G. Office Expenses					\$0.00
H. Equipment (Inventory)					\$0.00
I. Rental or Use of Space					\$0.00
J. Rental of Equipment					\$0.00
K. Insurance					\$0.00
L. Membership Fees & Subscriptions					\$0.00
M. Advertising					\$0.00
Total Expenditures	\$0.00		\$0.00		\$0.00

Cash match amounts appearing on this worksheet are not included in Total Agency Budget Summary page as "cash match". They appear on the Total Agency Budget Summary page as part of your funding.

**Cash Match Narrative Justification**

Complete your cash match justification description on the next page.

**2014/2015 FCADV Cash Match Narrative**  
**Provider Name:**