

**PART II PROJECT EXPENDITURES - DETAIL INFORMATION**

**FUND CODE: 317**

<b>A.</b>		<b>FUND CODE: 317</b>			
<b>B. APPLICANT AGENCY:</b>		<i>District Code:</i>			
<i>Contact Person:</i>	<i>Address:</i>		<i>Zip Code:</i>		
<i>Title:</i>	<i>Telephone: (      )</i>		<i>Extension:</i>		
<i>Email Address:</i>	<i>Program Website URL:</i>				

*PLEASE PROVIDE THE INFORMATION REQUESTED ABOVE AND SUBMIT BOTH PAGES OF THE BUDGET DETAIL EVEN THOUGH THERE MAY BE NO LINE ITEM ENTRIES ON THE FIRST PAGE.*

<p><b>C. <u>ASSIGNMENT THROUGH SCHEDULE A</u></b> <span style="float: right;"><input type="checkbox"/></span></p> <p>Check this box ONLY if this project will be using funds assigned by more than one agency. A completed Schedule A, with signatures and the amount of funds assigned by each participating agency, must be attached to this Budget Detail.</p>
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D. GRANT CATEGORIES	AMOUNT	LINE ITEM SUB-TOTAL
1. ADMINISTRATORS:		
SUB-TOTAL		
2. METCO INSTRUCTIONAL SERVICES: per allotment schedule		
3. SUPPORT STAFF:		
SUB-TOTAL		
<p>*Check the MTRS box if the identified employee(s) is/are a member of the MA Teachers' Retirement System. This requirement applies only to federally-funded grant programs.</p>		
4. FRINGE BENEFITS:	<b>AMOUNT</b>	<b>LINE ITEM SUB-TOTAL</b>
4-a MA TEACHERS' RETIREMENT SYSTEM (Federally-funded grants only)		
4-b OTHER FRINGE BENEFITS (Other retirement systems, health insurance, FICA)		
SUB-TOTAL		
5. CONTRACTUAL SERVICES: Indicate the services to be provided and the rate to be paid <u>per hour</u> or <u>per day</u> , whichever is applicable.		
SUB-TOTAL		

<b>APPLICANT AGENCY:</b>		<b>FUND CODE: 317</b>	
6. SUPPLIES AND MATERIALS: Items costing less than \$5,000 per unit <u>or</u> having a useful life of less than one year.	<b>AMOUNT</b>	<b>LINE ITEM SUB-TOTAL</b>	
SUB-TOTAL			
7. TRAVEL: Mileage, conference registration, hotel, and meals			
SUB-TOTAL			
<b>8. METCO - STUDENT TRANSPORTATION:</b> Per allotment schedule			
9. INDIRECT COSTS <span style="float: right;">Approved Rate:</span>			
10. EQUIPMENT: Attach a list with a statement of need and cost of each item. Items costing \$5,000 or more per unit <u>and</u> having a useful life of more than one year.			
SUB-TOTAL			
<b>TOTAL FUNDS REQUESTED:</b>			