



**Broadband Technology Opportunities Program
Public Computer Centers Program – Sustainable Adoption Program**

Submitted Date: 7/22/2010 4:10:07 PM		Easygrants ID: 6364	
Funding Opportunity: Sustainable Broadband Adoption		Applicant Organization: GEORGIA PARTNERSHIP FOR TELEHEALTH INC	
Task: Submit Due Diligence - SBA Applications		Applicant Name: Mrs. Paula B Guy	

Uploads

The following pages contain the following uploads provided by the applicant:

Upload Name
Round 2 SBA Due Diligence Documentation
Round 2 SBA Due Diligence Documentation
Round 2 SBA Due Diligence Documentation
Round 2 SBA Due Diligence Documentation
Round 2 SBA Due Diligence Documentation

To preserve the integrity of the uploaded document, headers, footers and page numbers have not been added by the system

MEMORANDUM

To: BTOP Program Staff
National Telecommunications & Information Administration
Department of Commerce

From: Paula Guy, AOR
Georgia Partnership for TeleHealth, Inc
EasyGrants ID: 6364

Memo Date: 07/20/10

Re: Revised Response to Question(s) 32, 35, and 36 Included on BTOP
Application Originally Submitted on 03/15/10

This memorandum documents our formal submission of a revised response to Question(s) 32, 35, 36, and other metrics of our organization’s BTOP application (EasyGrants ID 6364), as follows:

Question 32: Project Budget

Please see the revised response below.

Project Budget	
Federal Grant Request	\$2,462,975
Total Match Amount	\$1,227,416
Total Budget	\$3,690,391
Match Percent	33.3%

Question 35: Matching Funds

Please see the revised response below.

Cash Match: \$777,880

In-kind Match: \$449,536

Question 36: Budget Narrative

Please see the revised response below.

Personnel: \$532,500

The Project Director and Assistant Director will have primary responsibility for the implementation of grant activities. The Health Information Technology Officer develops, plans, and implements the overall strategic goals of the organization's network system. The Clinical Officer coordinates with specialty, primary care providers and presentation sites in developing collaborations with communities, pharmacies, health information systems, and scheduling. Rural Liaisons will analyze regional needs and provide education, marketing, and training to healthcare providers, professionals, site staff, and communities.

Fringe: \$159,750

Fringe is calculated at 30% of personnel costs.

Travel: \$91,080

Travel expenses include travel to sites for implementation and marketing, the TeleConnect Georgia to Better Health Conference, and travel to the ATA conference and the HIT conference.

Equipment: \$1,681,971

The equipment budget items relate to the expansion of the telehealth rural network from the 133 sites to 197 sites. New network and telehealth equipment will be required for 26 community mental health sites, 11 hospitals, 4 FQHCs, 1 school site and 12 child advocacy / nursing home sites.

Supplies: \$1,800

Supplies are for toner cartridges and paper related BTOP project. These supplies will be used toward implementing telehealth services to 64 new locations.

Contractual: \$1,066,210

The contractual expenses include:

The **HomeTown Health University** for curriculum development and setting up the training center, the web platform, learning management system license, and "Go To Webinar" license and the **University of GA** for evaluation processes.

The **Strategic Health Care Partners** is for HIT consultant services and access to physician network and broadband education.

Georgia Public Web for circuit charges, long haul transport charges, and engineering of network; **Stat Health Services** for primary care services for EMR and the **GA Primary Care Assn.** for program awareness and outreach to FQHCs and critical care access hospitals.

Other: \$157,080

"Other" expenses include legal fees to Morris, Manning, & Martin and office space for the coordination of the BTOP project. "Other" also includes phone and telecommunications, as well as, print media for awareness campaigns.

CERTIFICATION REGARDING LOBBYING

Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 15 CFR Part 28, "New Restrictions on Lobbying." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Commerce determines to award the covered transaction, grant, or cooperative agreement.

LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 15 CFR Part 28, for persons entering into a grant, cooperative agreement or contract over \$100,000 or a loan or loan guarantee over \$150,000 as defined at 15 CFR Part 28, Sections 28.105 and 28.110, the applicant certifies that to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure occurring on or before October 23, 1996, and of not less than \$11,000 and not more than \$110,000 for each such failure occurring after October 23, 1996.

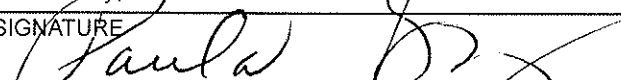
As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above applicable certification.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

In any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure occurring on or before October 23, 1996, and of not less than \$11,000 and not more than \$110,000 for each such failure occurring after October 23, 1996.

NAME OF APPLICANT	AWARD NUMBER AND/OR PROJECT NAME
Georgia Partnership for TeleHealth, Inc.	TeleConnect Georgia for Better Health
PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	
Paula Guy, Executive Director	
SIGNATURE	DATE
	June 30, 2010

CERTIFICATION REGARDING LOBBYING LOWER TIER COVERED TRANSACTIONS

Applicants should review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 15 CFR Part 28, "New Restrictions on Lobbying."

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(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure occurring on or before October 23, 1996, and of not less than \$11,000 and not more than \$110,000 for each such failure occurring after October 23, 1996.

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As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above applicable certification.

NAME OF APPLICANT

Georgia Partnership for TeleHealth, Inc.

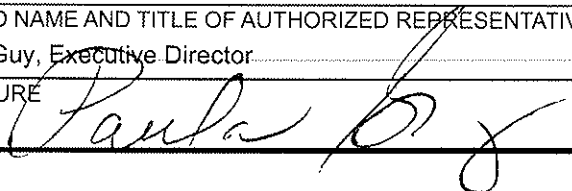
AWARD NUMBER AND/OR PROJECT NAME

TeleConnect Georgia for Better Health

PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE

Paula Guy, Executive Director

SIGNATURE



DATE

June 30, 2010

**BTOP Public Computer Center and Sustainable Broadband Adoption
Detailed Budget Template**

Easy Grants ID: 6364 7/13/2010
 Applicant: Georgia Partnership for
 TeleHealth, Inc
 Project Title: TeleConnect Georgia
 For Better Health

SF-424A Object Class Category	General	Detail							
a. Personnel - List position, number of staff, annual salaries, % time spent on project	Position	Federal Support	Matching Support	Total	# of Positions	Salary	% Time Spent on Project	Quarters Employed	Total
	Project Director- Project Implementation and mgmt of BTOP-SBA Project - Rena Brewer MA Organizational Leadership	\$95,000.00		\$95,000.00	1	\$95,000.00	100%	4.00	\$95,000.00
	Assist Director - To be hired- Responsible for outreach and broadband sustainability	\$50,000.00		\$50,000.00	1	\$50,000.00	100%	4.00	\$50,000.00
	HIT/Information Officer - To be hired- Manage network, systems integrity and HIPAA compliance, risk management, software, hardware administration	\$75,000.00		\$75,000.00	1	\$75,000.00	100%	4.00	\$75,000.00
	Clinical Officer - Provide oversight-collaboration with rural and specialty providers, school nurse program, mental health programs, utilization review	\$75,000.00		\$75,000.00	1	\$75,000.00	100%	4.00	\$75,000.00
	New Rural Liaison - Onsite Provider training, program development, community activities and awareness	\$112,500.00		\$112,500.00	3	\$37,500.00	100%	4.00	\$112,500.00
	Current Rural Liaisons - analysis of regional needs referral patterns, providing education, marketing and training to healthcare providers, professionals, site staff, and the communities	\$62,500.00	\$62,500.00	\$125,000.00	4	\$62,500.00	50%	4.00	\$125,000.00
Subtotal		\$470,000.00	\$62,500.00	\$532,500.00					

b. Fringe Benefits - Include salaries and fringe rate.	Position	Federal Support	Matching Support	Total	# of Positions	Salary	% Time Spent on Project	Quarters Employed	Fringe Rate	Total
	Project Director Fringe	\$28,500.00		\$28,500.00	1	\$95,000.00	100%	4.00	30.00%	\$28,500.00
	Assist Director	\$15,000.00		\$15,000.00	1	\$50,000.00	100%	4.00	30.00%	\$15,000.00
	HIT/Information Officer	\$22,500.00		\$22,500.00	1	\$75,000.00	100%	4.00	30.00%	\$22,500.00
	Clinical Officer	\$11,250.00	\$11,250.00	\$22,500.00	1	\$75,000.00	100%	4.00	30.00%	\$22,500.00
	New Rural Liaison	\$33,750.00		\$33,750.00	3	\$37,500.00	100%	4.00	30.00%	\$33,750.00
	Current Rural Liaisons	\$37,500.00		\$37,500.00	4	\$62,500.00	50%	4.00	30.00%	\$37,500.00
Subtotal		\$148,500.00	\$11,250.00	\$159,750.00						

c. Travel - For significant costs, include details such as number and purpose of trips, destinations.	Purpose of Trip	Federal Support	Matching Support	Total	# of Trips	Cost per Trip	Total
	Travel to sites for training, implementation of new sites and marketing. 600 round trips x \$110.00 (.55 per mile).	\$66,000.00		\$66,000.00	600	\$110.00	\$66,000.00
	TeleConnect Georgia to Better Health Conference 150 persons x \$133.00 per person= \$19,950.00.	\$19,950.00		\$19,950.00			\$0.00
	ATA conference, HIT Conference, X 3 persons: Hotel \$155.00 per night x 3 nights x 2 Conferences = \$2,790.00. Air Flight - \$350.00 per person x 3 x 2 flights = \$2,100.00. Round trip travel to airport = \$.55 per mile = 436 = \$240.00	\$5,130.00		\$5,130.00	2	\$2,565.00	\$5,130.00
				\$0.00			\$0.00
Subtotal		\$91,080.00	\$0.00	\$91,080.00			

d. Equipment Costs - List equipment with # of units and unit costs. Distinguish between equipment intended for applicant use versus equipment for the end user.	Equipment Description	Federal Support	Matching Support	Total	#Units	Unit Cost	Total
Applicant Equipment							

	Paper		\$600.00	\$600.00	200	\$3.00	\$600.00
Subtotal		\$0.00	\$1,800.00	\$1,800.00			

f. Contractual - List contractors with purpose of contract, hourly rate or total fixed rate.

Contractor	Federal Support	Matching Support	Total	# Hours (If Applicable)	Hourly Rate (If Applicable)	Total Contract
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HomeTown Health University - labor (curriculum development and setting up the training center):						
Online Curriculum Development: 700 hours x \$100/hour	\$50,000.00	\$20,000.00	\$70,000.00	700	\$100.00	\$70,000.00
Online Technical Development (setting up online training center, course set up, 24/7 user support): 908 hours x \$50/hour	\$30,000.00	\$15,400.00	\$45,400.00	908	\$50.00	\$45,400.00
Live Webinar Training: 18 hours/month x \$100/hour x 12 months	\$10,000.00	\$11,600.00	\$21,600.00	216	\$100.00	\$21,600.00
HomeTown Health University - web platform (Learning Management System License, GoToWebinar License):			\$0.00			\$0.00
GoToWebinar License: 1000 seats = \$250/month x 12 months	\$0.00	\$3,000.00	\$3,000.00			\$0.00
Learning Management System License, up to 5000 seats = \$7,500/month x 12 months	\$50,000.00	\$40,000.00	\$90,000.00			\$0.00
HomeTown Health - Marketing Strategy, Management services, sustainability development, grant writing, group purchasing	\$70,000.00	\$45,000.00	\$115,000.00	1,150	\$100.00	\$115,000.00
UGA Evaluation	\$69,750.00		\$69,750.00	310	\$225.00	\$69,750.00
Strategic Healthcare Partners - Program HIT Consultant, Access to	\$116,510.00	\$45,250.00	\$161,760.00	2,022	\$80.00	\$161,760.00
Georgia Public Web - Circuit Installation charges, long haul transport charges, engineering of network 1132 Hours at \$300.00 per hour	\$77,540.00	\$262,060.00	\$339,600.00	1,132	\$300.00	\$339,600.00
Stat Health Services - Primary care services, for electronic medical records accessibility. Access to Network Platform \$25,000; Network Platform \$50,000; EMR Modification/Utilization \$25,000		\$100,000.00	\$100,000.00	N/A	N/A	N/A
Georgia Primary Care Association - TeleConnect Conference, program awareness and outreach to take the TeleConnect Program out to FQHC and Critical Access Hospitals.		\$50,100.00	\$50,100.00	334	\$150.00	\$50,100.00
			\$0.00			\$0.00
Subtotal	\$473,800.00	\$592,410.00	\$1,066,210.00			

g. Construction - If applicable, list construction costs

Description	Federal Support	Matching Support	Total
			\$0.00
			\$0.00
			\$0.00
Subtotal	\$0.00	\$0.00	\$0.00

h. Other - List costs associated with grant subrecipients as well as other costs not listed above such as rent, technology (website hosting, internet connection), advertising (TV, radio, online), etc.

Description	Federal Support	Matching Support	Total	#Units (If Applicable)	Unit Cost (If Applicable)	Total
Legal Fees - Morris, Manning & Martin 33 hours x \$300.00 per hour	\$9,900.00		\$9,900.00			\$0.00

	Strategic Healthcare Partners -in-kind office space=\$600.00 per month = \$7,200.00		\$7,200.00	\$7,200.00			\$0.00
	Rent-Main Office - One unit at \$1665.00 per month x 12 months 2000 square ft = \$83.25 per Sq ft. per month.		\$19,980.00	\$19,980.00			\$0.00
	Telecommunications: Maintenance of Telehealth Network Hub - \$3,700.00 per month = \$44,400.00	\$10,000.00	\$34,400.00	\$44,400.00			\$0.00
	Phone - \$300.00 per month x 12 = \$3,600.00 and Cell Phone - 10 employees \$ 100.00 per month = \$1000.00 x 12 = \$12,000		\$15,600.00	\$15,600.00			\$0.00
	Print media for awareness campaign for 100,000 households	\$50,000.00		\$50,000.00	100,000	\$0.50	\$50,000.00
	Bilingual Print media for awareness campaign low income HH 20,000 households	\$8,000.00	\$2,000.00	\$10,000.00	20,000	\$0.50	\$10,000.00
	Subtotal		\$77,900.00	\$79,180.00			\$157,080.00

i. Total Direct Charges (sum of a-h)		\$2,462,975.00	\$1,227,416.00	\$3,690,391.00
j. Indirect Charges				\$0.00
Total Eligible Project Costs		\$2,462,975.00	\$1,227,416.00	\$3,690,391.00
Match Percentage		33.3%		

Explanation of Indirect Charges

Additional Budget Notes

Budget Information - Non Construction Programs

Section A - Budget Summary						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. GPT - BTOP-SBA Grant	11.557			\$2,462,975	\$1,227,416	\$3,690,391
2.						\$0
3.						\$0
4.						\$0
5. Totals		\$0	\$0	\$2,462,975	\$1,227,416	\$3,690,391
Section B - Budget Categories						
6. Object Class Categories	Grant Program, Function or Activity				Total (5)	
	(1)	(2)	(3)	(4)		
a. Personnel	\$470,000	\$62,500			\$532,500	
b. Fringe Benefits	\$148,500	\$11,250			\$159,750	
c. Travel	\$91,080				\$91,080	
d. Equipment	\$1,201,695	\$480,276			\$1,681,971	
e. Supplies		\$1,800			\$1,800	
f. Contractual	\$473,800	\$592,410			\$1,066,210	
g. Construction					\$0	
h. Other	\$77,900	\$79,180			\$157,080	
i. Total Direct Charges (sum of 6a-6h)	\$2,462,975	\$1,227,416		\$0	\$3,690,391	
j. Indirect Charges					\$0	
k. Totals (sum of 6i-6j)	\$2,462,975	\$1,227,416		\$0	\$3,690,391	
7. Program Income						
			Page 1 of 5			\$0

Section C - Non-Federal Resources				
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) Totals
8. Georgia Partnership for TeleHealth BTOP-SBA	\$264,906	\$300,000	\$662,510	\$1,227,416
9.				\$0
10.				\$0
11.				\$0
12. Total (sum of lines 8 - 11)	\$264,906	\$300,000	\$662,510	\$1,227,416

Section D - Forecasted Cash Needs					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th quarter
13. Federal	\$0				
14. Non-Federal	\$0				
15. Total (sum of lines 13 and 14)	\$0	\$0	\$0	\$0	\$0

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project				
(a) Grant Program	Future Funding Periods (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.				
17.				
18.				
19.				
20.				
21. Total (sum of lines 16-19)	\$0	\$0	\$0	\$0

Section F - Other Budget Information	
21. Direct Charges	22. Indirect Charges

23. Remarks

Instructions for the SF-424A

Public Reporting Burden for this collection of information is estimated to average 3.0 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Please do not return your completed form to the Office of Management and Budget; send it to the address provided by the sponsoring agency.

General Instructions

This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A, B, C, and D should include budget estimates for the whole project except when applying for assistance which requires Federal authorization in annual or other funding period increments. In the later case, Sections A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories shown in Lines a-k of Section B.

Section A. Budget Summary Lines 1-4 Columns (a) and (b)

For applications pertaining to a **single** Federal grant program (Federal Domestic Assistance Catalog number) and **not requiring** a functional or activity breakdown, enter on Line 1 under Column (a) the catalog program title and the catalog number in Column (b).

For applications pertaining to a **single** program **requiring** budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the catalog program title on each line in **Column** (a) and the respective catalog number on each line in Column (b).

For applications pertaining to **multiple** programs where one or more programs **require** a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

Lines 1-4, Columns (c) through (g)

For new applications, leave Columns (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Column (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

Line 5—Show the totals for all columns used.

Section B. Budget Categories

In the column headings (a) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function or activity, fill in the total requirements for funds (both Federal and non-Federal) by object class categories.

Lines 6a-i—Show the totals of Lines 6a to 6h in each column.

Line 6j—Show the amount of indirect cost.

Line 6k—Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.

Line 7—Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount. Show under the program narrative statement the nature and source of income. The estimated amount of program income may be considered by the federal grantor agency in determining the total amount of the grant.

Section C. Non-Federal Resources

Lines 8-11—Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

Column (a)—Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

Column (b)—Enter the contribution to be made by the applicant.

Column (c)—Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

Column (d)—Enter the amount of cash and in-kind contributions to be made from all other sources.

Column (e)—Enter totals of Columns (b), (c), and (d).

Line 12—Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f) Section A.

Section D. Forecasted Cash Needs

Line 13—Enter the amount of cash needed by quarter from the grantor agency during the first year.

Line 14—Enter the amount of cash from all other sources needed by quarter during the first year.

Line 15—Enter the totals of amounts on Lines 13 and 14.

Section E. Budget Estimates of Federal Funds Needed for Balance of the Project

Lines 16-19—Enter in Column (a) the same grant program titles shown in Column (a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisions (amendments, changes, or supplements) to funds for the current year of existing grants. If more than four lines are needed to list the program titles, submit additional schedules as necessary.

Line 20—Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

Section F. Other Budget Information

Line 21—Use this space to explain amounts for individual direct object-class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

Line 22—Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

Line 23—Provide any other explanations or comments deemed necessary.

