PEI Revenue and Expenditure Budget Worksheet

Enclosure 3A

FY 08-09

Instructions: Please complete one budget Form No. 4 for each PEI Project and each selected PEI provider.					
county Name:			Date:		
El Project Name:					
rovider Name (if known):					
ntended Provider Category:					
roposed Total Number of Individuals to be served:	FY 07-08		FY 08-09		
otal Number of Individuals currently being served:	FY 07-08		FY 08-09		
otal Number of Individuals to be served through PEI					
xpansion:	FY 07-08	0	FY 08-09	0	

Months of Operation:

	Total Prog	Total Program/PEI Project Budget			
Proposed Expenses and Revenues	FY 07-08	FY 08-09	Total		
A. Expenditure					
Personnel (list classifications and FTEs)					
a. Salaries, Wages					
			\$0		
			\$0		
			\$0		
b. Benefits and Taxes @ %			\$0		
c. Total Personnel Expenditures	\$0	\$0	\$0		
2. Operating Expenditures					
a. Facility Cost	\$0	\$0	\$0		
b. Other Operating Expenses	\$0	\$0	\$0		
c. Total Operating Expenses	\$0	\$0	\$0		
3. Subcontracts/Professional Services (list/itemize	all subcontracts)				
	\$0	\$0	\$0		
	\$0	\$0	\$0		
	\$0	\$0	\$0		
a. Total Subcontracts	\$0	\$0	\$0		
4. Total Proposed PEI Project Budget	\$0	\$0	\$0		
B. Revenues (list/itemize by fund source)	_				
,	\$0	\$0	\$0		
	\$0	\$0	\$0		
	\$0	\$0	\$0		
1. Total Revenue	\$0	\$0	\$0		
5. Total Funding Requested for PEI Project	\$0	\$0	\$0		
6. Total In-Kind Contributions	\$0	\$0	\$0		

FY 07-08