

City of Boulder Housing and Human Services

# Health Equity Fund Application Guide

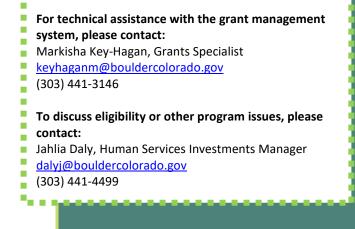
Proposal Due Date: 4:00 p.m. MDT Tuesday, August 22, 2023.

All proposals shall be submitted via the Foundant online grant management system.

Paper and late applications will not be accepted.

# 2024 Fund Round





# **Table of Contents**

Торіс	Page Number
Important Information About the 2024 Health Equity Fund Application	4
Create a New Account	5
Email Confirmation	6
Apply For Funding	6
General Information	6
Detailed Application Information	7
Applicant Dashboard	9
Application Sections	10
Pre-Qualification Questions	10
Agency Assurances	10
Amount Requested	10
Agency Section	11
Agency Contact Information	11
Agency Narrative	11
Agency Budget	12
Agency Budget Narrative	12
Supporting Documents	12
Program Section	12
Program Narrative:	13
Program Demographics	13
Program Demographics Narrative	14
Funding Request Budget	14
Program Revenue	14
Funding Award Expenditure	14
Excess or Shortfall of Revenue and Expenses	15
Program Budget Narrative	15
Scope of Work	15
Activity	16

	Outputs	16
	Timeline	16
	Partners	16
	Outcomes	16
	Measurement Tool	16
	Indicators	17
Budget	Line-Item Definitions	18
	Revenue/Income:	18
	Expenses:	18

# Important Information About the 2024 Health Equity Fund Application

- 1. Late applications will <u>not</u> be accepted. The grant management system automatically closes promptly at 4:00 p.m. on Tuesday, August 22, 2023.
- 2. Do not try to access the application by going directly to Foundant.com. Instead, please use this link: <u>https://tinyurl.com/msebxrja</u>
- 3. If you wish to apply for *Boulder County Worthy Cause Funding* or the *Regional Collaboration for Human Services Funding*, please complete those specific applications in Foundant when those respective fund rounds are open.
- 4. If you are seeking funding for more than one program, you will need to submit an additional application.

\***note:** you can use Foundant's "copy request" feature to help save time in completing subsequent applications (see <u>this</u> tutorial for more information).

- 5. If you need to change your agency address, Executive Director/President/CEO name or primary application contact person, please contact Markisha at Key-HaganM@bouldercolorado.gov. It is the agency's responsibility to ensure all contact information is up to date.
- 6. You will not be able to submit the application until <u>all</u> of the required sections are saved and marked as complete. The required sections are marked with an asterisk.
- 7. Please carefully read the definitions in the *Scope of Work* section of this Application Guide <u>before</u> filling out your application. Understanding the terms will result in a better-quality proposal and, if funded, a more efficient process to finalize the funding contract and scope of work.

# **Create a New Account**

Creating a new account is a multi-step process; follow the instructions below to create a new account. If you need assistance or have questions about who should create an account, please see the <u>Regional</u> <u>Grant Management System Technical Assistance Guide</u>.

\*Please note, in 2022, the city began accepting applications through the Foundant Grant Management System. If you have previously applied for a HEF grant but this is your first time accessing the Foundant GMS system, you will need to create a new account - passwords and applications were not migrated to the new site.

- 1. From the Logon page, click **Create New Account.**
- 2. Once organization information has been entered, click **Next**.
- 3. Enter the user information in the following section, click **Next** when complete.
  - Complete this section with your information.
  - If your address is the same as your organization's, you may use the *Copy Address from Organization* button to automatically pull the address information from the organization address fields into the address fields in this section.
  - The email address entered in the *Email / Username* field becomes your username in the system.
  - Should you need to navigate to the previous section in the registration process, you must use the **Previous** button at the bottom of each section in order for the information entered in registration fields to remain intact. If you attempt to navigate to the previous section by using the browser's back button, you will lose all registration information you have entered.
- 4. The next section is titled "CEO, President, Executive Director".
  - If you are the CEO, President, or Executive Director of the organization, select the Yes radio button and click **Next**.
  - If you are not the CEO, President, or Executive Director of the organization, select the *No* radio button, click **Next**, and complete the required CEO, President, or Executive Director Information fields.
- 5. Once the CEO, President or Executive Director's information is entered, click **Next** to create a password.
- 6. Create a password for your account and click **Create Account**.

# **Email Confirmation**

Upon creating an account, you will be taken to the Email Confirmation page, so you can confirm that you are receiving emails from the system.

- 1. Follow the on-screen instructions and click **Continue** to finish the registration process.
- 2. Now you have an account in this system, and remember, this is an account that you will use for both present and future applications.

\*If you do not receive the email confirmation, please reach out to Markisha Key-Hagan at <u>key-haganm@bouldercolorado.gov</u> for assistance. It is critical that communication with the system is established to receive notifications and other communications from City of Boulder staff.

# **Apply For Funding**

Upon completing registration and accessing the system for the first time, you will land on the Apply page. This page will show you any currently open opportunities that you can apply for, as well as any relevant deadlines and other applicable information related to them.

#### **General Information**

- 1. You can preview the application without having to save any work by clicking on the **Preview** button.
- 2. To start a request, click on the blue **Apply** button under the opportunity you'd like to apply to.
  - This will take you into a form to complete and submit.

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- 3. Once in the form, note that your contact and organization information automatically populates at the top of the form.
  - You may update your contact information and view your email history.
  - Organization information:

- $\,\circ\,$  Currently, you will only be able to update the following contact information for your organization:
  - Web site
  - Telephone Number
  - Email
- Please contact the Grant Management System Administrator, Markisha Key-Hagan, at key-haganm@bouldercolorado.gov to change any of the other "Organization Information" fields.

#### 4. If you'd like a PDF copy of the application, you can click the Question List

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FOUNDANT 🕋 🖹 Apply 🕲 Orga	anization History				
Contact Info Request	SAT	SAT	SAM	SAT	SAL
Applicant: Mr. John Smith ohn.smith@example.org 123-123-1234 123 Main St. New York City, NY 12345	Contact Email History	Organization: John's Org 12-1234567 123-123-1234 123 Main St. New York City, NY	12345 United States		
<ol> <li>If your organization information does not appear correct,</li> </ol>	please click the edit (pencil)	icon.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~~~	
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Fields with an asterisk (*) are required.					
~					
Project Name*					
Name of Project.					
Amount Requested*					
Allount Requested					

- 5. Please note the **deadline indicated on each application**. Applications will not be accepted after this date.
- 6. Once you've completed the form, you may click the Packet button to download a copy of the questions and your responses.

#### **Detailed Application Information**

- 1. Work your way through the form responding to the fields.
  - Note that any fields with an asterisk are required fields and must be completed prior to submitting an application.
  - As you complete the form, the system will auto-save every 100 characters typed or every time you click out of a field.

• You may notice that questions are divided into sections indicated by a gray bar that contains a title/name and the corresponding questions below it. These are referred to as question groups. You may collapse question groups as you go, once you've finished all the questions in that group, by clicking on the arrow next to the question group name. This can help serve as an indicator to yourself that you've completed that section and reduce scrolling.

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	(i) Fields with an asterisk (*) are required.		
	Pre-Qualification		
	Pre-Qualification		
	Please answer the following questions to determine whether the agency meets the minimum criteria for submit	ting an application.	
	Federal Nonprofit Status*		
	Does your agency have federal non-profit status [e.g. 501(c)(3)]?		
	A sense wavides health and human services to specifically identified torget populations t		
		P for details)? (link needed here)	
	O Yes		
	○ No		
	City of Boulder Health Equity Fund Program Priorities*		
	Select ONE of the following City of Boulder Health Equity Fund Program Priorities, that best reflects the proposal.		

- Some fields have character limits.
- You will not be allowed to submit the form until the length of the response has been decreased in accordance with the limit.
- Responses that are longer than the set limit will be saved, but an error message will appear informing the applicant that the limit has been exceeded.
- 2. File upload fields will only accept one file per field.
  - Follow the name convention noted in each question/field.
  - If you attempt to upload a file that is larger than the set MiB limit, you will receive an error message informing you that the file is too large and the file *will not* be saved.
  - If you attempt to upload a file in an unaccepted file type, you will receive a warning that the file type is not acceptable; and you will not be able to upload the file.
  - Upload fields have size limits.
  - Upload fields may also have file type restrictions.
  - Once a file has been uploaded, it may be deleted by clicking the red X next to the file name and a new file can be uploaded.
- 3. Even though the system is auto-saving, there is still a Save button at the bottom of the form.
  - If you click Continue you will be taken back into the form so you can continue working.
  - If you save and exit the system, you will access the draft of the form from your dashboard the next time you log in.
  - Pick back up where you left off by clicking the Edit link to the right of the request.

- When you click "Save" you are taken to a confirmation page so you know the save was successful.
- 4. When all of the fields are complete, submit the form.
  - If any required fields were not completed, or a response to a text question type is longer than the set limit, the system will not allow the form to be submitted.
  - An error message appears listing the fields that need to be completed or edited.
  - These fields are outlined in red, so they are easy to identify as the applicant scrolls through the form.
  - When a form is submitted successfully, the applicant will be taken to a confirmation page.
  - When you click Continue, you are taken to your dashboard where you can view your submitted request.
  - Once an application has been submitted, you can no longer edit it.

# **Applicant Dashboard**

Your dashboard houses current and historical requests. The Active Requests tab houses all current requests. These are the requests still requiring action, awaiting a decision, and/or requests that have not yet been marked closed by the site administrator. Within each request you can see forms, form statuses and submission dates, and, if applicable, form deadlines.

- You may continue working on saved forms by clicking the edit option next to the form.
- You may view forms that have been submitted. Once submitted, you cannot edit them.
- You can also see the request's decision status.
- The status will show "Undecided" until the site administrator posts a decision.
- Timing on decision status updates vary depending on the foundation.

Denied requests and requests marked closed by the site administrator are housed in the Historical Request tab.

If you wish to edit your account information or change your password, click your name in the top right. This will expand a drop-down menu where you will have the option to edit your profile information, including changing your password. Be sure to click save in the bottom right once you've finished.

Please note, that you will be automatically logged out of the system after 90 minutes of inactivity (you will receive a warning message at 80 minutes of the pending time out).

# **Application Sections**

The application consists of two main sections – agency and program. In this case, the term "agency" means any non-profit organization, institution, government agency or department that is applying for funding. "Program" refers to the specific program or project for which the agency is seeking funding.

In the application, the agency section contains questions about the entire agency. The program section contains the questions that relate to the program and more specifically, to the 2024 funding request. The Scope of Work section relates to the proposed program.

## **Pre-Qualification Questions**

In this section, applicants will provide answers to pre-qualification questions to determine whether the agency meets the minimum criteria for submitting an application. The Pre-Qualification section is a required part of the application and consists of four questions that ask applicants to provide information including agency type and status, target population, and which *Health Equity Fund (HEF) Program Priority* the program best relates. If the proposed program has elements of more than one priority, please select the ONE option that best describes the program:

- 1. Chronic disease prevention through physical fitness
- 2. Chronic disease prevention through food and water security
- 3. Chronic disease prevention through health and wellness education
- 4. Chronic disease prevention through a key social determinant of health
- 5. Physical, dental or behavioral health services
- 6. Research or educational campaigns designed to identify, understand and address health disparities
- 7. Systems integration or collaborative approaches that provide more coordinated, efficient, and effective health equity services.

#### **Agency Assurances**

In this section, the agency will indicate whether or not it complies with the *Americans with Disabilities Act* and the various insurance coverages required by the City. In the event of funding, your agency may have to provide proof of compliance. Funded agencies will be required to provide a valid certificate of insurance.

#### **Amount Requested**

In this section, the agency will indicate the amount it is requesting for funding from the 2024 HEF fund round. \*Please note: applications requesting less than \$10,000 will not be accepted.

# **Agency Section**

This part of the application provides an overview of the agency and its work.

#### **Agency Contact Information**

Provide primary and secondary contact information for *the program in which you are requesting funds for in this application.* 

#### **Agency Narrative**

This section provides the overview of the agency and helps reviewers to understand the overall work of the agency. There is one open text field where agencies will provide a narrative description that must include a description of each of the following elements:

- **Primary Purpose and Functions** describe your agency's primary mission and the main daily functions. Think of this as the elevator speech of who the agency is and what it does.
- **Strategic Agency Goals** be brief and list the agency's strategic goals. This question will help inform how the request for funding fits within the overall strategic direction for the agency.
- Unique Service describe what sets your agency apart from other agencies that serve similar clients or have similar missions and deliverables. If your agency provides similar services as another agency, provide specific information on how you work with other agencies to avoid duplication.
- **Key client demographics served** describe the demographics of the agency's target populations.

In addition:

Board of Directors Table – please enter information about the agency's Board of Directors in the table OR upload an existing Board of Directors (BOD) table that lists board members, board position, occupation/employer, city of residence, year term end and years of service. If an existing BOD table will be uploaded, please rename it in the following format: "2024 HEF [Agency name] [Board Table]".

- Agency Board and Staff Demographics provide race/ethnicity, gender, residence, and languages spoken for board members and staff.
- Inclusive and Equitable Board and Staff Practices describe the organizational plan, policies and/or procedures and activities that the organization has or will implement to ensure that board and staff recruitment and hiring are inclusive and representative of the community that the organization serves. Examples could range from reserving spaces on the board for underserved population members to annual trainings for board and staff members on inclusive practices.

#### **Agency Budget**

Complete and upload the budget template provided or provide your own projected 2024 revenue and expenses for the entire agency. The revenue template **requires itemization** for the following <u>revenue</u> sources – *federal, state, Boulder County, City of Boulder, other government, foundations, and other revenue*. Itemization is also required for the following <u>expense</u> categories – *salaries, supplies/materials, staff travel, subcontracts/consultants, and other expenses*.

*Excess or Shortfall of Revenues and Expenses* – This is auto calculated and will subtract revenues minus expenses. The agency budget narrative provides space to explain anything beyond a zero budget.

#### **Agency Budget Narrative**

Explain any excess or shortfall and provide information on agency reserves, and the reserve policy (or if no reserves/reserves policy, to explain why). The question regarding reserves is required in this section. If you do not have a budget excess/shortfall, please type "N/A".

#### **Supporting Documents**

Upload the most recent agency financial audit, non-profit determination letter (e.g., 501c3 letter) and year-end financial documents (e.g., income/expenditure statement and balance sheet). Submission of these documents is required.

\*There will be an upload box for each document being requested. Please note that each file upload box will only accept <u>one</u> file. Therefore, due to system constraints, if there are multiple documents for each upload box, they will need to be combined into one file. For example, if the financial audit consists of three different documents, they will need to be combined them into one document in order to upload it. If you have any issues combining your documents, please contact Markisha Key-Hagan <u>key-haganm@bouldercolorado.gov</u>.

#### **Program Section**

This is the section of the application where the agency will provide information specific to the funding request.

#### **Program Narrative:**

**Program Name** – list the name of the program.

Goals – briefly list the program goals for 2024.

**Target Population** – this should be a brief description of the target population (e.g., low-income City of Boulder youth, ages 11 - 17). Tell us enough so that we get a sense of the target population and be as specific as possible about how the target population is experiencing health disparities. However, please save information on how the agency has identified the needs of the target population for the Program Rationale question.

**Program Description** – this section is a brief overview of the program and the anticipated health benefits that will result from the program. Agencies will also need to identify what, if any, historical or current inequities are being addressed by the program and their root causes.

**Needs Assessment** – this section is the description of how it was determined that there is a need for the program, and what sources of information were used to make this determination.

**Program Rationale** – the response should describe why you believe the proposed program will best serve the target population, and how you know that you are reaching people with the greatest health equity needs. How do you know the program is likely to be successful? Please briefly include specific evidence-based research findings, traditional knowledge, or other factors used to determine why you are undertaking this program.

**Outreach and Engagement** – this section is a brief description of how the program will reach the intended population in a culturally relevant and responsive manner and, a space to list specific key outreach activities such as community events. Explain how clients and participants will be engaged in the design, implementation, and evaluation of the program.

**Program Evaluation** – provide a summary of the evaluation design; the type of data that is collected to evaluate program services, what methods are used to collect the data, how often the data is collected and how the data is used to modify the delivery of the program. For example, *MY AGENCY collects pre- and post- activity data for every family participating in the XYZ program. We also collect feedback and input from participants so we know what's going well and what we can do better. The pre/post evaluation and input from participants, provides an overall picture of the effectiveness of the program's services.* 

#### **Program Demographics**

Complete the table to provide the projected unduplicated clients you intend to serve with this program, if funded for 2024. The columns will automatically total.

#### Please note:

- If your program is providing a monthly class for 30 participants and the participants remain the same throughout the year, the projected unduplicated clients served is <u>30</u> not 360 (30 clients X 12 monthly classes).
- Use the total projected clients served by the program for each grantee that you are applying for funding for as the total for each additional table (age, race and ethnicity, gender, and income level). For example, if 100 clients are projected for City of Boulder, all other categories should add up to 100 for City of Boulder.

The guide for the 2023 Housing and Urban Development guidelines can be found here: <u>https://www.huduser.gov/portal/datasets/il.html#2023\_data</u>. Select any FY2023 HUD Metropolitan FMR Area's Income Limits. Once there, simply select Boulder from the drop-down list to access the appropriate table.

#### **Program Demographics Narrative**

Use this section to provide any explanations of the demographic information you provided.

# **Funding Request Budget**

The funding request shows how you intend to spend the money that is being requested. Please use the template provided to share your projected budget for this 2024 funding request (projected revenue, expenses, and excess or shortfall). All agencies will need to complete the program revenue section, and this is the total anticipated revenue for the proposed program.

#### **Program Revenue**

Please project your entire 2024 program revenue from all sources. Remember to include total program revenue from all local government funding program sources. For example, if you receive or are requesting program funding from the City of Boulder Human Services Fund and the Health Equity Fund, you would list both sources by clicking on "City of Boulder" and itemizing both revenue sources.

#### **Funding Award Expenditure**

Use this section to put your request for funding from the City of Boulder. The "Other Funders" column is where all other expenses for the proposed program will go. For example, if the total program anticipated expenses adds up to \$500,000 and the total requested from the City of Boulder is \$200,000, the "Other Funders" column should itemize out the remaining \$300,000 for program expenses.

#### **Excess or Shortfall of Revenue and Expenses**

This field will auto-calculate. There is an opportunity to explain an excess or shortfall in the next section "program budget narrative."

#### **Program Budget Narrative**

Use this section to provide any additional information about the budget including explanation for any excess or shortfall of revenue and expenses. This is also space to provide information on funding request changes from the previous year's application. Identify changes where more or less funding is being requested.

# **Scope of Work**

The Scope of Work section is where you provide brief yet specific descriptions (in a logic model-style format) of how funding would be used. If the agency is funded for the proposed program, details in this Scope of Work section will be used in the funding contract between the agency and the City of Boulder. The more specific and accurate the information in this section of the application, the more efficient the contract finalization process will be for funded agencies.

Applicants will first need to list activities associated with the proposed program, followed by additional details associated with those activities. Note that **only one activity at a time** should be listed in each "program activity" text box <u>AND</u> you can only enter up to five activities per application. To start, the first question will ask you how many activities you plan to associate with the proposed program. After you select your answer, additional scope of work sections will begin to appear depending on the answer you chose. In each scope of work section, you will be asked to enter one program activity and the corresponding outputs, timeline, partners, outcomes, measurement tools and indicators associated with that activity.

\*It may be that several activities share the same outcome. It is acceptable to list the same outcome for multiple activities, as long as the outcomes are as specific as possible, and reflect the goals provided in the Program Narrative.

In completing the outputs in the scope of work, the numbers provided should be an **unduplicated** count if possible. This information is helpful in measuring the total number of community members impacted by all Health Equity Fund supported programs. For example: your agency provides an educational program consisting of three, six-week class sessions. The same 10 families attend the first six-week session and you have a new set of 10 families for each of the next two six-week sessions. For this program, the agency would list 30 unduplicated City of Boulder families for the program.

Definitions and examples for the Scope of Work terms are as follows:

#### Activity

A brief statement describing a specific action that will help meet the program goals; for/with what target population; and where the activity will take place.

*Example:* Host 12 1-hour strawberry-picking classes for City of Boulder low-income residents ages 65+. Classes will take place once per month at the YOLO Center.

#### Outputs

The anticipated number of people served by the activity, and the anticipated direct results of the activity.

*Example: Anticipated 20 unduplicated low-income senior residents participate in at least six of the 12 classes.* 

#### Timeline

Specific details on when the activity will take place, frequency and for what length of time.

*Example: Classes will be held once per month beginning in January 2022, for a duration of one hour per class, throughout the grant period.* 

#### Partners

Names of other agencies collaborating with or assisting in the activity, and what function the partner will perform.

*Example: Organization X will assist in teaching each of the strawberry-picking classes, and will provide educational materials to class participants.* 

#### Outcomes

Pre-determined descriptions of the short-, intermediate- or long-term changes that will result from the activity. In other words, brief descriptive statements on the impacts of the funded program Outcomes should show progress toward, or fulfillment of the goals provided in the Program Narrative. Outcomes measure the positive change that occurred because of program activities.

Example: Low-income senior residents have increased access to strawberry-picking classes. Class participants increased knowledge of strawberry-picking techniques. Class participants also increased consumption of strawberries, for better overall wellness.

#### Measurement Tool

Describe the tools or methods you will use to determine the success of the activity. How will you show that the outcomes were achieved?

Example: Program staff will track class participation with attendance sheets and will conduct pre- and post- program participant surveys including questions about personal health impacts and behavior changes resulting from classes.

#### Indicators

Data that helps measure progress toward the program goals, and shows that the activities, outputs and outcomes were achieved. Indicators describe who benefitted from the activity and how. The indicators can be written in a manner that will help funded agencies provide real data for grant reports. For example, "Actual number of residents", "Actual pounds of food distributed," or "Actual percentage decrease in body-mass index measurements."

*Example:* Actual total number of unduplicated low-income senior residents who participated in each class, and frequency of participation in classes. Actual number of people who reported improved health outcomes related to the classes.

# **Budget Line-Item Definitions**

#### Revenue/Income:

<u>Federal:</u> Separately list the federal dollars received or projected to receive for 2024 (e.g., Department of Education \$50,000).

<u>State:</u> Separately list the state dollars received or projected for 2024 (e.g., Department of Local Affairs \$200,000).

<u>Boulder County Government:</u> Separately list Boulder County Government dollars received or projected for 2024, include the amount requested in the application (e.g., TSN \$50,000, Human Services Funding \$10,000, etc.).

<u>Boulder:</u> Separately list City of Boulder dollars received or projected for 2024, including the amount requested in the HEF application (e.g., CDBG, \$25,000, HSF \$10,000, HEF \$25,000).

<u>Other Government</u>: Separately list amounts received or projected to be received in 2024 from other government sources not already identified.

<u>Other Foundations</u>: Separately list the amounts received or projected for 2024 from other foundations (e.g., Rose Foundation, \$15,000, Denver Foundation, \$5,000).

<u>Fundraising and Contributions</u>: Provide the total amount received or projected to be received in 2024 from fundraising activities, such as special events, individual donors, trusts, bequests, etc.

<u>Program Fees:</u> Provide the total amount of fees projected to be paid by clients (or on client's behalf) to participate in a program or to receive a program's services.

<u>Other Revenue</u>: If the revenue of an agency is properly classified, very little should usually remain to be shown as Other Revenue. If there are items that fit within this category, please list them separately.

#### Expenses:

<u>Salaries:</u> List the projected staff salaries by position for 2024 (e.g., Executive Director \$50,000, Program Coordinator \$20,000). If your agency is quite large and has dozens of staff members or more, you may summarize salaries for the Agency or Program budgets. However, please list specific positions and salary amounts for the Funding Request Budget.

Payroll Taxes and Benefits: Provide the total amount of payroll taxes and benefits projected for 2024.

<u>Rent:</u> Provide the total amount of rent or mortgage projected for 2024.

<u>Supplies:</u> Separately list the supplies and materials purchased/projected to be purchased for 2024 (e.g., Workbooks \$5,000, office supplies \$1,000, food \$3,000).

<u>Computer Hardware/Software:</u> Provide the total amount of computer hardware and software expenditures/projected expenditures for 2024, that are necessary for the proposed program activities.

<u>Telephone</u>: Provide the total amount of telephone related expenditures/projected expenditures for 2024.

<u>Printing/Copying</u>: Provide the total amount of printing and copying expenditures/ projected expenditures for 2024.

<u>Staff Travel</u>: Separately list expenditures/projected expenditures for staff travel (local and distance) for 2024 (e.g., local mileage reimbursement for two staff \$500, airfare to XYZ annual conference \$350, conference registration \$250, conference hotel \$600).

<u>Training:</u> Separately list the projected expenditures for agency and program staff training (total conference and other training expenditures).

<u>Subcontracts/Consultation Services:</u> Separately list each expenditure/anticipated expenditure for agency and programs' subcontracts/consultation services (e.g., subcontract for part-time therapist \$6,000, consultant to assist with board development \$10,000).

<u>Other Expenses</u>: Separately list any expenditures not covered above. This is also the place to include an estimated amount to off-set the value of the projected in-kind services.