

## Appendix A

### Scope of Work, Sub-Grants, and Annual Budget

As part of this grant agreement, you are required to provide a description of how you will spend the grant funds in compliance with the specific purpose as stated in the Appropriations Act ("Scope of Work"). You are also required to submit information related to any potential sub-grants and a budget for the grant funds. Please attach additional sheets as necessary.

**1. Organization:**

**2. Grant ID:**

**3. Scope of Work,  
Objectives, Results,  
Performance Measures:**

Recipient shall detail below how the organization will spend the grant funds in compliance with the specific purpose(s) as stated in the Appropriations Act. The description should include objectives to be achieved, expected results and performance measures. The description should also include anticipated timing of those objectives, expected results and any services provided.

Objective(s):

Expected  
Results:

Performance  
Measure(s):

<b>4. Sub-grants:</b>			
a. Does the Recipient anticipate that it will sub-grant or pass down any funds to another organization?		Yes	No
If yes, answer the following:			
b. Name of Sub-recipient	c. Program Name	d. Amount to Sub-recipient	

**5. Budget:**

Below are general expenditure descriptions that can serve as a **guide** for preparing the organization's budget related to the grant award. Please provide a breakdown of estimated expenses for each category below or as an attachment.

The following budget is for the time period beginning ( \_\_\_\_\_ ) and ending ( \_\_\_\_\_ ).

**EXPENDITURE DESCRIPTION**

**AMOUNT**

**Employee Expenses** (e.g. program related staffing).

**Services and Contract Expenses** (e.g. utilities, telephone, data, lease related expenses)

**Goods** (e.g. supplies and equipment) **Expenses**

**Administration Expenses** (e.g. overhead & project management)

**Other Expenses** (e.g. related charges not assigned above and described by recipient)

**Total Beginning Balance of the Project Fund**

**Provide a breakdown of estimated expenses for each category below or as an attachment.**

Please note, you will sign off on this appendix as part of executing the Grant Agreement (Contract).

Printed Name

Title

Signature

Date