

<b>4.02 Single Occupancy Grant Application Submission Information</b>	
Date of Submission	
Applicant Name/Organization	
Preparer Name	
Preparer Phone	
Preparer Email	

**Innovative Models of Care Grant Budget Summary**

Budget Category	Calendar Year 2022	Calendar Year 2023(1)	Total	Narrative/Description
Personnel	\$0	\$0	\$0	
Equipment	\$0	\$0	\$0	
Supplies	\$0	\$0	\$0	
Contractors	\$0	\$0	\$0	
Services	\$0	\$0	\$0	
Construction				
<b>Total Project Costs</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	

**Instructions -**

Please provide amounts and narrative justification for each budget category. Narrative & justification can include vendor quotes, description of the scope of the work, level of effort (LOE), and how the cost rates were determined. If needed, add additional tables on new tabs to accurately reflect your proposed budget.

(1) Please note: all funds must be spent by September 31, 2024.

(2) Provide, as available, a narrative of contract costs, including: vendor quotes & itemized cost build-ups, period of performance, description of the scope of the work, supplies, how base cost rates and user rates were determined. Describe how each contract relates to furthering the objectives of the program. Add additional tables as necessary on new tabs to show calculations.

(3) Capital costs are to be 25% of the budget or lower.