

## Appendix A

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

As part of your grant application, 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](#). You are also required to submit information related to any potential contracts or sub-grants, as well as a budget for the grant funds. Please attach additional sheets as necessary.

**1. Organization:**

**2. 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):

3. Contractors and Subrecipients:			
Does the Recipient anticipate that it will (1) pay any funds to a contractor or (2) sub-grant any funds to a subrecipient? (*See Section 9 of the Terms and Conditions re: the distinction.)		Yes	No
If yes, answer the following:			
Name of Contractor or Subrecipient	Contractor or Subrecipient?*	Amount	

**4. Budget:**

Below are general expenditure description lines for entering your anticipated budget for facility improvements. You will need to enter the lines in a manner that describes what your grant funding will be spent on (ex. Supplies: paint and painting materials; shelter furniture; general office furniture; etc.).

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

EXPENDITURE DESCRIPTION	AMOUNT
<b>Services and Contract Expenses</b> (e.g. construction or paint contractor, etc.)	
<b>Goods Expenses</b> (e.g. supplies and equipment)	
<b>Administration Expenses</b> (e.g. overhead & project management)	
<b>Other Expenses</b> (e.g. related charges not assigned above and described by recipient)	
<b>Total Beginning Balance of the Project Fund</b>	

Please note, you will sign off on this document as part of your agency application for funding.

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Printed Name \_\_\_\_\_ Date \_\_\_\_\_

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Title \_\_\_\_\_ Signature \_\_\_\_\_