

APPENDIX B - BUDGET TEMPLATE
Budget Proposed for June 1, 2014 - May 31, 2015

B. ADDITIONAL PROFESSIONAL SERVICES

TYPE OF SERVICES	Annual No. of Hours or Other Unit	Hourly Rate, Monthly Contract Rate, or Per Case Rate	Total Annual Cost
Contractual Non-Attorney Professional Services (Type of service, unit and rate must be specified in budget narrative.)			\$0.00
Out-of-Court Interpreters			\$0.00
Other (Specify in Budget Narrative)			\$0.00

TOTAL PERSONAL and PROFESSIONAL SERVICES **\$0.00**

C. OPERATING EXPENSES

TRAVEL	Annual No. of Miles/Lodging Nights/Per Diems Provided	Mileage, Lodging Rate, or Per Diem Rate	Total Annual Cost
Mileage			\$0.00
Lodging			\$0.00
Per Diem			\$0.00
Other (please specify)			\$0.00

ANNUAL TRAINING BUDGET

INSURANCE	
Commercial General Liability	
Business Automobile Liability	
Professional Liability	
Workers' Compensation	
Employers' Liability	
Check if Self-Insured	

RENT

APPENDIX B - BUDGET TEMPLATE
Budget Proposed for June 1, 2015 - May 31, 2016

B. ADDITIONAL PROFESSIONAL SERVICES

TYPE OF SERVICES	Annual No. of Hours or Other Unit	Hourly Rate, Monthly Contract Rate, or Per Case Rate	Total Annual Cost
Contractual Non-Attorney Professional Services (Type of service, unit and rate must be specified in budget narrative.)			\$0.00
Out-of-Court Interpreters			\$0.00
Other (Specify in Budget Narrative)			\$0.00

TOTAL PERSONAL and PROFESSIONAL SERVICES **\$0.00**

C. OPERATING EXPENSES

TRAVEL	Annual No. of Miles/Lodging Nights/Per Diems Provided	Mileage, Lodging Rate, or Per Diem Rate	Total Annual Cost
Mileage			\$0.00
Lodging			\$0.00
Per Diem			\$0.00
Other (please specify)			\$0.00

ANNUAL TRAINING BUDGET

INSURANCE	
Commercial General Liability	
Business Automobile Liability	
Professional Liability	
Workers' Compensation	
Employers' Liability	
Check if Self-Insured	

RENT

APPENDIX B - BUDGET TEMPLATE
Budget Proposed for June 1, 2016 - May 31, 2017

B. ADDITIONAL PROFESSIONAL SERVICES

TYPE OF SERVICES	Annual No. of Hours or Other Unit	Hourly Rate, Monthly Contract Rate, or Per Case Rate	Total Annual Cost
Contractual Non-Attorney Professional Services (Type of service, unit and rate must be specified in budget narrative.)			\$0.00
Out-of-Court Interpreters			\$0.00
Other (Specify in Budget Narrative)			\$0.00

TOTAL PERSONAL and PROFESSIONAL SERVICES **\$0.00**

C. OPERATING EXPENSES

TRAVEL	Annual No. of Miles/Lodging Nights/Per Diems Provided	Mileage, Lodging Rate, or Per Diem Rate	Total Annual Cost
Mileage			\$0.00
Lodging			\$0.00
Per Diem			\$0.00
Other (please specify)			\$0.00

ANNUAL TRAINING BUDGET

INSURANCE	
Commercial General Liability	
Business Automobile Liability	
Professional Liability	
Workers' Compensation	
Employers' Liability	
Check if Self-Insured	

RENT

FACILITIES	
Rent	
Buildout	
Furniture	
Computers	
Telephones	
Other (specify)	

OVERHEAD (Please specify overhead in lines below)	

TOTAL STARTUP OPERATING EXPENSES **\$0.00**

GRAND TOTAL **\$0.00**