



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

**ATTACHMENT F- LINE-ITEM BUDGET AND BUDGET NARRATIVE (SAMPLE)  
YEAR 1**

To be funded:

CATEGORY	ITEM	NARRATIVE	AMOUNT
SALARY/WAGE			
FRINGE BENEFITS			
OTHER PERSONNEL (temporary/ contract staff)			
SUPPLIES MATERIALS			
EQUIPMENT			
TRAVEL			
ADVERTISING			
DUES AND SUBSCRIPTIONS			
STAFF DEVELOPMENT			
PROFESSIONAL SERVICES			
CONTRACTUAL SERVICES			
OTHER (Ex. rent/lease-office, furniture, vehicles, equipment, etc.)			
INDIRECT COST/ ADMINISTRATIVE EXPENSE- This is claimed to be based on a Federally approved negotiated rate or a 15% de minimis.			
CONTRACT VALUE			

SUBTOTAL CONTRACT VALUE YR 1: \_\_\_\_\_