**ATTACHMENT B**

**Kitsap County Commission on Children and Youth**

**Programs that Prevent and Reduce the Impact of Adverse Childhood Experiences through Building Resiliency**

**Line Item Budget Detail**

|  |  |
| --- | --- |
| **Organization:** | **Project Title:** |
| **Cost Category: Expense Item** | **Private Funds** | **Public Matching Funds** | **Grand Total** |
| 1. | Staff Salaries |  |  |  |
| 2. | Staff Benefits |  |  |  |
|  | a) Percent of Salaries (%) |  |  |  |
| 3. | Travel or Transportation |  |  |  |
| 4. | Communications |  |  |  |
| 5. | Facilities |  |  |  |
| 6. | Office Supplies |  |  |  |
| 7. | Materials or Curriculum |  |  |  |
| 8. | Equipment or supplies |  |  |  |
| 9. | Training |  |  |  |
| 10. | Subcontracts\* |  |  |  |
| 11. | Miscellaneous\*\* |  |  |  |
|  | a) |  |  |  |
|  | b) |  |  |  |
|  | c) |  |  |  |
|  | d) |  |  |  |
|  | e) |  |  |  |
|  | f) |  |  |  |
| 13. | Indirect Costs  |  |  |  |
| 14. | Other  |  |  |  |
| 15. | **TOTAL** |  |  |  |
| \* Subcontracts must be in accordance with the statement of work and approved by the Kitsap County Representative. \*\* Miscellaneous expenses must be listed in more detail in the space provided |