ATJ Fund Grant Application - Project Budget Detail

Applicant Organization Name:

Project Name:

Budget Detail: Prepare your budget using this template or any other Excel file showing the same information. Note: The information shown is for illustration only. You do not have to fill in every category. Delete the illustrative information in the WHITE CELLS and then enter the correct amounts. Do not delete or enter information in the colored cells. These cells contain formulas that will automatically calculate your totals. CHECK ALL CALCULATIONS and PAGE BREAKS!!

Salaries and Wages, By Position	Number	Percent Time (100%=Full-Time)	Annual Full-time Salary or Wage	Sub-Total	This Application	Other Funds	Sub-total
Executive Director	1	5.0%	$ 65,000	$ 3,250	$ 3,250	$ -	$ 3,250
Project Manager	1	15.0%	$ 55,000	$ 8,250		$ 8,250	$ 8,250
Attorney	1	100.0%	$ 37,500	$ 37,500	$ 37,500		$ 37,500
Paralegals/Community Workers	2	50.0%	$ 30,000	$ 30,000	$ 15,000	$ 15,000	$ 30,000
Other Staff (list):							
Secretary	1	25%	$ 27,000	$ 6,750		$ 6,750	$ 6,750
				$ -			$ -
				$ -			$ -
				$ -			$ -
Total Salaries and Wages				$ 85,750	$ 55,750	$ 30,000	$ 85,750
Percent Total					65%	35%	100%

Employer Provided Benefits	As Percent of Salaries	Total Salaries	Sub-total	This Application*	Other Funds	Sub-total
FICA	6.2%	$ 85,750	$ 5,317	$ 3,457	$ 1,860	$ 5,317
Medicare	1.5%	$ 85,750	$ 1,286	$ 836	$ 450	$ 1,286
Health Insurance		$ 85,750	$ -	$ -	$ -	$ -
Retirement Plan		$ 85,750	$ -	$ -	$ -	$ -
Other (list)						
		$ 85,750	$ -	$ -	$ -	$ -
		$ 85,750	$ -	$ -	$ -	$ -
		$ 85,750	$ -	$ -	$ -	$ -
Total Employer Provided Bernefits			$ 6,603	$ 4,293	$ 2,310	$ 6,603

* Calculated automatically based on percent of salary. If benefit costs are not allocated to the same sources as salaries, enter the amount allocated to "This Application" and spreadsheet will calculate "Other Funds".

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Justification for Salaries, Wages and Benefits: Provide a brief explanation of any costs that are higher than those typically found in NM legal services programs.

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Space Costs (For This Project Only)	Per Month	Months	Sub-total	This Application	Other Funds	Sub-total
Rent or monthly mortgage payment	$ 400.00	12	$ 4,800		$ 4,800	$ 4,800
Utilities	$ 350.00	12	$ 4,200	$ 2,200	$ 2,000	$ 4,200
Other Space Costs (list)						
Janitor	$ 300.00	$ 12	$ 3,600	$ -	$ 3,600	$ 3,600
			$ -			$ -
			$ -			$ -
			$ 12,600	$ 2,200	$ 10,400	$ 12,600

Travel In-State	Miles Per Month	Months	Cost/Mile	Sub-total	This Application	Other Funds	Sub-total
Attorney	200	12	$ 0.51	$ 1,224	$ 306	$ 918	$ 1,224
Paralegals	300	12	$ 0.51	$ 1,836	$ 1,000	$ 836	$ 1,836
Project Manager	100	12	$ 0.51	$ 612	$ 612	$ -	$ 612
Executive Director	50	6	$ 0.51	$ 153	$ -	$ 153	$ 153
Other Staff (list)							
				$ -			$ -
				$ -			$ -
				$ -			$ -
				$ 3,825	$ 1,918	$ 1,907	$ 3,825

Out-of-State Travel	Air-fare	Hotel	Food and Other	Sub-total	This Application	Other Funds	Sub-total
ABA Access to Justice Conference	$ 425	$ 375	$ 225	$ 1,025	$ -	$ 1,025	$ 1,025
				$ -			$ -
				$ -			$ -
				$ 1,025	$ -	$ 1,025	$ 1,025

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Training and Support	Air-fare	Hotel	Food and Other	Sub-total	This Application	Other Funds	Sub-total
Training Conference (Attorney)	$ 350	$ 350	$ 150	$ 850	$ -	$ 850	$ 850
				$ -			$ -
				$ 850	$ -	$ 850	$ 850

Telephone and Internet	Per Month	Months	Sub-total	This Application	Other Funds	Sub-total
Basic Service	$ 75	12	$ 900	$ 225	$ 675	$ 900
Long Distance	$ 25	12	$ 300	$ 75	$ 225	$ 300
Internet Charges	$ 45	12	$ 540	$ 135	$ 405	$ 540
Cell phone Charges			$ -			$ -
			$ 1,740	$ 435	$ 1,305	$ 1,740

Office Supplies	Per Month	Months	Sub-total	This Application	Other Funds	Sub-total
Office Supplies	$ 50	12	$ 600	$ 150	$ 450	$ 600
Other (list)						
			$ -			$ -
			$ -			$ -
			$ -			$ -
			$ 600	$ 150	$ 450	$ 600

All Other (list purpose of each cost)	Per Month	Months	Sub-total	This Application	Other Funds	Sub-total
Other administrative or overhad costs, as follows			$ -	$ -	$ -	$ -
			$ -			$ -
Equipment, as follows:			$ -			$ -

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Other, as follows:			$ -			$ -
			$ -			$ -
			$ -	$ -	$ -	$ -

Justification for All Other Cost Categories: Provide a brief explanation of any costs that are higher than those typically found in NM legal aid programs. In particular, provide justification for any purchases of equipment, for any out-of-state travel, or for any higher than usual overhead costs. See the Request for Proposals for more guidance. In addition show 1) total 2021-22 expected funding from all sources, including the amount requested in this application; 2) total 2021-22 expected overhead and administrative costs; 3) amounts requested in this applicastion as a percentage of total expected 2021-22 funds; and 4) administrative and overhead costs requested as a percentage of all expected 2021-22 administrative and overhead cost.