

##### Budget Form: RCD Financial Assistance Program

See budget preparation instructions to complete this form.

RCD Applicant: (A) Fiscal Sponsor: \_\_\_Yes \_\_\_No

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| --- | --- | --- | --- | --- | --- |
|  | **Total Budget**  **(B)** | **DOC Award**  **(C)** | **In-Kind Match**  **(D)** | **Cash Match**  **(E)** | **Attached Support Documents (Yes/No)**  **and Footnote (F)** |
| ***Capacity Building Salaries and Wages (G)*** |  |  |  |  |  |
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|  |  |  |  |  |  |
| Benefits **(H)** |  |  |  |  |  |
| ***Capacity Building Equipment***  ***& Supplies (I)*** |  |  |  |  |  |
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| ***Other (J)*** |  |  |  |  |  |
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| **Subtotal (K)** |  |  |  |  |  |
| ***Administration (L)*** |  |  |  |  |  |
|  |  |  |  |  |  |
| **TOTAL (M)** |  |  |  |  |  |

Budget Footnotes: (N)

See Instructions to complete this section