

**LOCAL WORKFORCE DEVELOPMENT BOARD
ONE-STOP OPERATOR ASSISTANCE BUDGET
ATTACHMENT "A" - BUDGET**

LWDB: _____

Date: _____

PROGRAM YEAR _____

Enter Annual Totals Only

| | | | | | TOTAL |
|-------------------------|------|------|------|------|--------------|
| Personnel | \$ - | \$ - | \$ - | \$ - | \$ - |
| Fringe | \$ - | \$ - | \$ - | \$ - | \$ - |
| Rental of Facilities | \$ - | \$ - | \$ - | \$ - | \$ - |
| Utilities | \$ - | \$ - | \$ - | \$ - | \$ - |
| Maintenance | \$ - | \$ - | \$ - | \$ - | \$ - |
| Equipment | \$ - | \$ - | \$ - | \$ - | \$ - |
| Technology | \$ - | \$ - | \$ - | \$ - | \$ - |
| Common Identifier Costs | \$ - | \$ - | \$ - | \$ - | \$ - |
| Other Costs | \$ - | \$ - | \$ - | \$ - | \$ - |
| | \$ - | \$ - | \$ - | \$ - | \$ - |
| | \$ - | \$ - | \$ - | \$ - | \$ - |
| | \$ - | \$ - | \$ - | \$ - | \$ - |
| | \$ - | \$ - | \$ - | \$ - | \$ - |
| TOTAL FUNDING | \$ - | \$ - | \$ - | \$ - | \$ - |

INSTRUCTIONS: ENTER TOTAL BUDGETED AMOUNT IN COLUMN "G" FOR EACH COST CATEGORY.

LOCAL WORKFORCE DEVELOPMENT BOARD
 ONE-STOP OPERATOR ASSISTANCE BUDGET
 BUDGET NARRATIVE ATTACHMENT "B"

LWDB _____

PROGRAM YEAR _____

| | | |
|--|----|---|
| SECTION I - Personnel (Specific Explanation of Planned Expenditures) | \$ | - |
| | | |
| SECTION II - Fringe (Specific Explanation of Planned Expenditures) | | <small>Enter Annual Totals Only</small> |
| | | |
| SECTION III - Rent of Facilities (Specific Explanation of Planned Expenditures) | \$ | - |
| | | |
| SECTION IV - Utilities (Specific Explanation of Planned Expenditures) | \$ | - |
| | | |
| SECTION V - Maintenance (Specific Explanation of Planned Expenditures) | \$ | - |
| | | |
| SECTION VI - Equipment (Specific Explanation of Planned Expenditures) | \$ | - |
| | | |
| SECTION VII - Technology (Specific Explanation of Planned Expenditures) | \$ | - |
| | | |
| SECTION VIII - Common Identifier Costs (Specific Explanation of Planned Expenditures) | \$ | - |
| | | |
| SECTION IX - Other Costs (Specific Explanation of Planned Expenditures) | \$ | - |
| | | |
| | \$ | - |
| | | |
| TOTAL FUNDING | \$ | - |

INSTRUCTIONS: TOTAL BUDGET AMOUNT (COLUMN H) WILL BE COPIED BY FORMULA FROM BUDGET PAGE.

INCLUDE IN THE SPACE PROVIDED FOR EACH COST CATEGORY SPECIFIC DETAILS OF WHAT EXPENDITURES ARE INCLUDED IN THE TOTAL BUDGETED AMOUNT AND JUSTIFICATION FOR THE PLANNED AMOUNT.