## Appendix E. -- ESTIMATED COST WORKSHEET

## **ESTIMATED COST WORKSHEET**

(15 points)

## All applicants must complete this worksheet.

Staff and Administrative Costs	Monthly Cost
Staff Salaries and Wages:	\$
Specify details- attach details if needed	
Staff Benefits including Workman's Compensation:	\$
specify details- attach details if needed	
Administrative Overhead	\$
Program Consultant Fees	\$
Staff Training Costs	\$
Travel Expenses	\$
Business/ Office Related Costs	•
Communication Costs	\$
Office Supplies	\$
Office Equipment/ Rental & Maintenance Costs &	\$
Supplies	
Building and Facility Program Related Costs*	
Space Costs-Rental or lease	\$
Utilities Costs	\$
Insurance Costs	\$
Fire Safety Costs/Maintenance	\$
Facility Maintenance	\$
	•
Specific Training Costs: Specify	\$
Other Costs: Specify	\$
TOTAL MONTHLY COSTS	\$

If necessary, adjust the above schedule to your program needs but address requested line items. If the cost is not applicable to your program, please state N/A and provide reasons for its being not applicable. In addition to the projected cost for each line item, be sure to include a detailed breakdown/description of how each line item total was determined. Additional schedules may be submitted for this purpose.

This information is being requested for the purposes of ensuring that potential vendors have fully considered estimates on all possible costs that might arise in the development and/or operation of this program. It will also be used by the regional center to determine reasonable reimbursement amounts for the service(s).