**Instructions for Budget Pages**

Follow the steps below to create an easy and accurate budget for your Title III Program. Please note that Area Agency on Aging for Lincolnland has added a worksheet for staff and salaries to help in the creation of budgets for Title III Programs. While working on the budget pages, keep in mind the following:

* All areas highlighted in YELLOW must be filled out with information about your program.
* Areas that turn RED indicate that information does not balance or foot. These areas turn GREY when they are correct.
* Salary and fringe benefit information from PAGE 2 SALARY and FRINGE WORKSHEET will automatically load into PAGE 3 and PAGE 4. PAGE 2 is not optional. You MUST complete a Service Column (columns i-p) for each service. Use the GOLD drop down menu on PAGE 2 of the Budget Pages to indicate the services for each Title.
* Agency information (e.g. the Fiscal Year, agency name, date etc.…) on Page 1 will populate through all budget pages.
* Separate budgets must be submitted for the following programs:
  + Title III B Support Services
  + Title III C1 Congregate Nutrition
  + Title III C2 Home Delivered Meals
  + Title III D Health Promotion: Evidence-Based
  + Title III E Caregiver Services

**The budget pages are set up on Excel spreadsheets. Tabs 1-4 (on the lower left- hand side of the screen) must be filled out and submitted electronically. Paper copies of budgets must be submitted only upon Area Agency on Aging for Lincolnland request.**

1. TAB 1 - CLIENT DEMOGRAPHICS. This form asks for the number of clients that will be served under the grant and details of the demographics for the total unduplicated clients. To develop projections applicants should consider:
   1. Local demographics for the area of service
   2. Past history with this service in the area proposed
   3. Their proposed outreach plans
2. TAB 2 - SALARY AND FRINGE WORKSHEET. This page asks for information about all individual staff positions utilized on the grant program, both paid and volunteer. Each position must be indicated separately (if two staff people have the same role, they must be listed separately). The budget justification must provide details about the fringe benefit package.
   1. Part One – ALLOCATIONS and COST
      1. Column (a)
         1. Line 1-indicate each staff title and name and the allocation of time dedicated to the position.
         2. Line 2 -indicate the percentage of fringe benefits assigned to this position. The budget justification must detail what is included in the fringe benefit package.
      2. Column (b) – All Sources Salary and Fringe (include Area Agency on Aging for Lincolnland funds, project income, local cash and in-kind funds)
         1. Line 1 – Indicate the full salary for the position
         2. Line 2 – Indicate the total fringe dollar amount for this position
      3. Column (c) – Staff % Allocation to Programs
         1. Indicate the percentage of time allocated to this position for the program.
      4. Column (d) - Area Agency on Aging for Lincolnland Funding
         1. Line 1 – indicate the amount of Area Agency on Aging for Lincolnland funding that will be allocated to this position.
         2. Line 2 – indicate the amount of fringe benefits (% of fringe X dollars above).
      5. Column (e) – Project Income
         1. Line 1 - indicate the amount of Project Income that will be assigned to this position.
         2. Line 2 – indicate the amount of fringe benefits (% of fringes X dollars above).
      6. Column (f) –
         1. Line 1 - indicate the amount of local cash that will be assigned to this position.
         2. Line 2 – indicate the amount fringe benefits (% of fringe X dollars above).
      7. Column (g)
         1. Indicate the total dollar value of in-kind for those positions that will be filled by volunteer time. The budget justification must have a reasonable hourly cost assigned to all volunteer time.
      8. Column (h) – Total cost for the position (columns d-g)
   2. PART TWO – SALARY and FRINGE BY SERVICE. There is a drop- down menu of programs for columns (i)-(p) that is highlighted in gold. Set up the service mix in the gold boxes using these drop-down menus.

For each service list salary costs in the following way:

* + 1. Line 1 - Indicate the amount of Area Agency on Aging for Lincolnland funds from each service that will used to pay for salaries and fringe benefits.
    2. Line 2- indicate the amount of Fringe Benefits assigned to the position for each service (this will be a portion of the total fringe benefits assigned based on the allocation formula).
    3. *Check the numbers*
       1. *Does the total allocation and total resources at the bottom of each section match?*
       2. *Are the salary allocations for each staff role correct? Are these documented in the budget justification?*

1. TAB 3 – BUDGET DETAIL. This page asks for information about other expenses related to the program for Title III and Matching funds. The information from Tab 2 and Salaries and Fringe will AUTOMATICALLY POPULATE.
   1. Travel
   2. Supplies/Equipment
   3. Other (Rent, Utilities)
   4. Include all MATCH dollars for these expenses
2. TAB 4 – BUGET SUMMARY
   1. Fill out sections in YELLOW with information from TAB 2 and TAB 3
   2. Fill out the sections on MATCH. All local cash must be identified. All in-kind volunteer hours must have a reasonable hourly value and appear in the budget justification.
3. TAB 5 – Reimbursement Request. *The amounts must match the approved Area Agency on Aging for Lincolnland funding listed in the executed Notice of Grant Award.*

**CHECKLIST**

* Are staff allocations accurate? Does the budget justification match the formula used in the budget pages?
* Do expense and revenue sources match?
* Have any areas turned RED?
* Are all sections in YELLOW addressed (not every space will be filled out, but every section requires attention).
* For each expense is a resource listed in Tab 2 and Tab 3?
* Are the expenses correctly assigned to each service?

Note: There are expenses line items listed for “food” and “delivery” – these are NOT allowable expenses for any Title III-B, D, or E grants. If an applicant proposes food for a training or support group, please list that under “other”.