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| <b>DETAILED BUDGET FOR INITIAL BUDGET PERIOD</b> | FROM | THROUGH |
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List PERSONNEL (*Applicant organization only*)  
 Use Cal, Acad, or Summer to Enter Months Devoted to Project  
 Enter Dollar Amounts Requested (*omit cents*) for Salary Requested and Fringe Benefits

| NAME | ROLE ON PROJECT | Cal. Mnths | Acad. Mnths | Summer Mnths | INST.BASE SALARY | SALARY REQUESTED | FRINGE BENEFITS | TOTAL |
|------|-----------------|------------|-------------|--------------|------------------|------------------|-----------------|-------|
|      | PD/PI           |            |             |              |                  |                  |                 |       |
|      |                 |            |             |              |                  |                  |                 |       |
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| <b>SUBTOTALS</b> → |  |  |  |
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| CONSULTANT COSTS   |  |
| EQUIPMENT ( <i>Itemize</i> )                               |  |
| SUPPLIES ( <i>Itemize by category</i> )                    |  |
| TRAVEL   |  |
| INPATIENT CARE COSTS                                       |  |
| OUTPATIENT CARE COSTS                                      |  |
| ALTERATIONS AND RENOVATIONS ( <i>Itemize by category</i> ) |  |
| OTHER EXPENSES ( <i>Itemize by category</i> )              |  |

|  |                                     |           |
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| CONSORTIUM/CONTRACTUAL COSTS   | DIRECT COSTS                        |           |
| <b>SUBTOTAL DIRECT COSTS FOR INITIAL BUDGET PERIOD</b> ( <i>Item 7a, Face Page</i> ) |                                     | <b>\$</b> |
| CONSORTIUM/CONTRACTUAL COSTS   | FACILITIES AND ADMINISTRATIVE COSTS |           |
| <b>TOTAL COSTS FOR INITIAL BUDGET PERIOD</b>   |                                     | <b>\$</b> |