

**Applicant Name:**

**Council on Domestic Violence and Sexual  
Assault  
Alaska Department of Public  
Safety BUDGET NARRATIVE  
Community-based Victim Services Grant Program FY19 – FY21**

**Personnel Services – 100:**

Provide a brief narrative for each position being funded by CDVSA. What is the Full-Time Equivalent (FTE) score for each position? What is the total cost for each position, how much salary\wage and fringe benefits will be funded by CDVSA, and how much Cash or In-Kind volunteers do you have to use as match?

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**Personnel Services – 100 (continued):**

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**Personnel Services – 100 (continued):**

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**Travel -200:**

Provide brief justifications of all travel being funded by CDVSA. Please provide narratives and associated costs under the following categories: emergency, non-emergency, training, and business. The 2-day CDVSA Grantee Meeting can be covered under business travel. Indicate any Cash or In-Kind being used as match.

**Applicant Name:**

**Facility Expenses – 300:**

Provide a brief narrative for each cost associated with maintaining and operating your facility(s) which will be funded (in whole or in part) using CDVSA funding. Indicate any Cash or In-Kind being used as match.

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**Commodities – 400:**

Provide a brief narrative of all commodities and supplies to be purchased using CDVSA funding that have a value under \$500 and generally has a useful life that's less than a year. Indicate any Cash or In-Kind being used as match.

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**Equipment – 500:**

Provide a brief narrative of all equipment being purchased using CDVSA funding that has a value over \$500 and generally has a useful life that's more than a year. Indicate any Cash or In-Kind being used as match.

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**Other Contractual Expenses – 600:**

Provide a brief narrative for all professional services, subscriptions, registration fees, media advertising and subcontracts what will be funded (in whole or in part) with CDVSA funding. Please provide additional justification if a subcontract exceeds 10% of the CDVSA grant amount. Indicate any Cash or In-Kind being used as match.

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**In-Direct Costs – 700:**

Briefly explain the amount of CDVSA funds to be used for your In-Direct costs. What is your federally negotiated In-Direct rate? If you're using the 10% de minimis rate then use 10% of your Total Direct Cost. If no In-Direct rate is being applied simply say so.

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**Sources of Funding Detail:**

Please provide a brief overview of all the funding sources being used in your budget, including CDVSA grant awards. Where have you received your Cash revenue from? What are you using as In-Kind?

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