**BSF RESEARCH GRANT APPLICATION BUDGET TABLE**

Complete one Budget Form for the **TOTAL** project budget and a separate one for each year of the project (NOTE: the annual figures will serve as the basis for funds distribution -- one half of the annual amount will be disbursed semi-annually unless explicit six-month budgets are submitted in addition); **list all amounts in US $**.

**Budget Categories as listed: Time Period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- |
| Salaries and Benefits (listed by individual):[See grant instructions for allowable direct cost percentages]SUBTOTAL(Subtotal not to exceed 75% of Direct costs) |  |
| Non-capital Equipment and Supplies (listed by category):SUBTOTAL |  |
| Patient Care (itemized by type of expense):SUBTOTAL |  |
| Other (itemized by type of expense):SUBTOTAL |  |
| **TOTAL DIRECT COSTS** |  |
| **TOTAL INDIRECT COSTS** (not to exceed 10% of Direct costs) |  |
| **TOTAL (Direct + Indirect) COSTS**(NOT TO EXCEED US $50,000 FOR IDEA GRANTS OR US $100,000 FOR DEVELOPMENT GRANTS) |  |

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