NEVADA COMMISSION FOR CULTURAL CENTERS & HISTORIC PRESERVATION (CCCHP) GRANT APPLICATION



Sub-total:

	ATION BUDGET						
APPLIC	ANT:						
	nnel: CCCHP Grant funds canno project.	t be used	to com	pensate per	sonnel. Mat	tch is limite	d to work related to
	Position Title	Hours	Hourly Rate (HR)	Does HR include fringe benefits?	% of HR that is fringe benefit	Amount of fringe benefit	Match (Non-CCCHP Grant)
a.							
b.							
c.							
d.							
e.							
e. f.							
g.							
h.							
i.							
i							

2. Travel: CCCHP Grant funds only cover travel for contracted service providers. This can be companies or individuals. Travel expenses must follow U.S. General Service Administration (GSA) rates.

	Contracted service provider	Match	CCCHP Grant	Total Amount
a.				
b.				
c.				
d.				
e.				
f.				
g.				
h.				
i.				
j.				
	Sub-total:			

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APPLICATION BUDGET Cont.	
APPLICANT:	

3. Contractual Services: Attach itemized lists or contractor quotes showing the breakdown of materials and labor costs for all proposed work items. If contractor is billing travel use travel section to record costs. *When listing materials, break out by type *When listing labor, define specific activities.

		Type of Material or Specific Activity	Match	CCCHP Grant	Total Amount
1.	AB Roofers				
	Roofing Labor	Install	\$1,000	\$2,000	\$3,000
	Roofing Materials	Shingles	\$0	\$5,600	\$5,600
		Sub-tota	1		

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APPLICATION BUDGET Cont.	
APPLICANT:	

4. Operating: List estimated operating expenses relating to the proposed project.

Note: CCCHP Grant funds cannot be used for administrative costs.

		# of	Rate	Flat Rate	Match	CCCHP Grant	Total Amount
a.	Photocopying						
b.	Film and Processing						
c.	Maps					ĺ	
d.	Postage						
e.	Telephone						
f.	Utilities						
g.	Supplies (specify)						
h.	Other (specify)			İ			
				İ		İ	
				İ			
	•			Sub-total:			

5. Other (please specify or attach detailed budget):

	Rate	Match	CCCHP Grant	Total Amount
a.				
b.				
c.				
d.				
e.				
f.				
g.				
h.				
i.				
	Sub-total			

NEVADA COMMISSION FOR CULTURAL CENTERS & HISTORIC PRESERVATION (CCCHP) GRANT APPLICATION



APP	LICATION BUDGET Cont.							
APP	LICANT:							
6. Se	ction #1- 5 Subtotals:							
<u> </u>		Match	CCCHP Grant	Total Amounts				
1.	Personnel							
2.	Travel			<u> </u>				
3.	Contractual Services							
4.	Operating							
5.	Other							
	Sub-total Sub-total							
9. Pr	oposed Project Costs Grand Total:							
<u>Topic</u> □ M		<u>Forms</u> □ Value	the CCCHP Grant Hand of Donated Material of Donated Equipment	lbook.				
_ ^ ^								