

Project Budget Worksheet- Section 5311 FY2018

COMPLETION DATE:

SUBCONTRACTOR:

COUNTY:

BUDGET YEAR:

A. CAPITAL

Federal ALI CODE	Description	Total
11.7A.00	Preventative Maintenance	
	Capital Subtotal	\$0

Federal	State	Cash Match	Inkind	MTP	Title III-B	Other
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0

B. OPERATING

Description	Total
1. Operations Staff	
2. Drivers Salaries	
3. Fringe	
4. Fuel and Oil	
5. Materials/Supplies	
6. Radio/Communications	
7. Utilities	
8. Advertising/Promotional	
9. Training/Travel	
10. Vehicle Storage/Office Space	
11. Leases and Rentals	
12. Audit/Legal	
13. Casualty/Liability Costs-Vehicle	
14. Casualty/Liability Costs-Other	
15. Employment Fees	
16. Miscellaneous	
17.	
18.	
Gross Operating Subtotal	\$0

Federal	State	Cash Match	Inkind	MTP	Title III-B	Other
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0

Fare Box Revenue:
Net Operating Subtotal:

Budget Totals:	Total
-----------------------	--------------

Federal	State	Cash Match	Inkind	MTP	Title III-B	Other
\$0	\$0	\$0	\$0	\$0	\$0	\$0

Maximum Reimbursable FED & STATE:
Total LOCAL MATCH: 0

Summary of Local Funds-2018

Page 2

COMPLETION DATE (mm/dd/yy)

SUBCONTRACTOR:

COUNTY:

BUDGET YEAR

INKIND STATEMENTS MUST BE PROVIDED IF USING INKIND AS A LOCAL SOURCE
Summary of Matching Funds

Source of Funds	Amounts
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
	\$0
Total of Local Funds	\$0

Comments: