**Research & Related Budget Form**

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| **Project Information** | |
| **Project Title:** | **Project Dates:** |
| **Contact Principal Investigator:** | **Institution/Affiliation:** |

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| 1. **Budget Period** | **Year:** 1 2  3 |

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| 1. **Personnel Effort** | | | | |
| *List all key personnel (including principal investigator and multi-principal investigators), base salary, and percent effort. If no salary requested, use $0 and indicate contributed effort.* | | | | |
| **Name** | **Title** | **Base Salary Amount ($)** | **Percent Effort**  **(1 – 100%)** | **Salary Total ($)** |
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| 1. **Fringe Benefits** | |
| *List fringe benefit and amount only for individuals for whom a salary is requested.* | |
| **Name** | **Amount ($)** |
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| 1. **Supplies** | |
| *Itemize supplies and amount.* | |
| **Supply** | **Amount ($)** |
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| 1. **Other** | |
| *Itemize other items and amount.* | |
| **Other item** | **Amount ($)** |
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| 1. **Total Direct/Indirect Costs** | |
| *List total direct costs, indirect costs (must not exceed 8% of direct costs), and total funding request (must not exceed the funding amount of the grant).* | |
| **Total Direct Costs ($)** |  |
| **Indirect Costs ($)** |  |
| **Total Funding Request ($)** |  |