
ILLINOIS CHILDREN'S HEALTHCARE FOUNDATION BUDGET NARRATIVE TEMPLATE

The purpose of the Budget Narrative is to help ILCHF better understand the scope and nature of your proposed project and to provide details that do not fit within the Project Budget Workbook. The Budget Narrative, combined with the Project Staffing Chart, should concisely explain how you arrive at the numbers in your Project Budget, specifically you should:

- Provide an explanation of both the Total Budget Year and the funding requested from ILCHF. See examples below.
- Choose one of the following formats for your Budget Narrative – Word .doc or .docx or Excel .xls or .xlsx.
- The Project Budget has four functional categories: Program Staff, Other Direct Costs, Purchased Services and Overhead Costs (not otherwise accounted for). List each category in your Budget Narrative. If a particular category has no content mark it N/A.
- If you are seeking funding to expand an existing program please note the following:
 - The “Total Program Budget” reflected in the Project Budget Workbook for Year 1 and for Year 2 should list the costs and revenue associated **with the expansion**; and
 - In the budget narrative delineate the total operational cost for the program for each of Year 1 and Year 2 (existing costs + expansion costs).

1. **PROGRAM STAFF**

The roles, credentials, time commitment and identity (to the extent known) of staff to be engaged in the project should be detailed in the Project Staffing Chart (PSC).

- a. **Agency Leader: details in PSC**
- b. **Project Director: details in PSC**
- c. **Other Project Staff – Type 1-5:** to the extent staff can be grouped by type, provide the total salary and fringe benefit cost in the Project Budget. Next provide an explanation of the type of staff and their role in the Budget Narrative. Information about individual members of a group of staff will be listed in the PSC. Do not change the title “Other Project Staff – Type 1” etc. in the Project Budget worksheet, it will cause the formulas to malfunction. Define the group in the Budget Narrative. See example below.

If there are more than 5 types of Other Project Staff, delineate the first 4 types and then use Type 5 as a catch all for all remaining positions. Next detail the types of positions in the Budget Narrative and the individual positions in the PSC.

If proposed project staff, other than the Agency Leader, are current employees of the applicant, please provide the following information for each person in the Budget Narrative: Name, Current Title, Hours Worked/Week and Current Duties.

Example

Year 1

c. Other Project Staff – Type 1: LCSWs

The line-item is to employ 2 LCSW's totaling 1.5 FTE's and the salary and fringe benefits detailed in the Project Budget is \$100,000. The details regarding each LCSW is in the PSC. 50% of these funds, \$50,000, are requested from ILCHF. The remainder will be covered by Medicaid.

Year 2

c. Other Project Staff – Type 1: LCSWs

The line-item is to employ 3 LCSW's totaling 3.0 FTE's and the salary and fringe benefits detailed in the Project Budget is \$180,000. The details regarding each LCSW is in the PSC. 60% of these funds, \$108,000 are requested from ILCHF. The remainder will be covered by Medicaid.

2. OTHER DIRECT COSTS

For each category, detail the calculation used to determine the amount requested in the budget. See example below. Any item which does fit within a listed category should be described in "Other Expenses".

- a. **Communications/Marketing**
- b. **Travel Expenses**
- c. **Meeting Expenses**
- d. **Survey/Data Collection**
- e. **Equipment**
- f. **Construction/Remodeling**
- g. **Project Space**
- h. **Other Expenses**

Example

Year 1 and 2

g. Project Space: funds are requested to pay for the rental of the space for \$100/month @ 24 months = \$2,400. These funds will be provided by the XYZ Foundation.

3. PURCHASED SERVICES

For each category, detail the calculation used to determine the amount requested in the budget. See example below. Any item which does fit within a listed category should be described in "Other".

- a. **Consultants**
- b. **Contracted Professionals**
- c. **Other**

Example

Year 1

b. Contracted Professionals: Funding in the amount of \$_____ is requested for a subcontract with (institution or company) for (brief statement of work). These funds are requested from ILCHF.

4. OVERHEAD COSTS (not otherwise accounted for)

ILCHF does not use an indirect cost based upon a percentage of the project as the means to pay indirect costs. However, ILCHF will consider covering specifically delineated overhead or indirect costs not otherwise accounted for.

Please list the elements of this category in the same manner as above starting with the letter “a” and providing the calculation/explanation for each expense in this category.

If there are insufficient lines under Overhead Costs (not otherwise accounted for), first unhide additional lines between line 45 and line 53. If additional lines are needed after that, use line 52 as “Other” as the catch all and detail its components in the Budget Narrative.

5. PROGRAM EXPANSION REQUESTS

If you are seeking funding to expand an existing program please note the following:

- The “Total Program Budget” reflected in the Project Budget Workbook for Year 1 and Year 2 should list the costs and revenue associated with the expansion.
- In the budget narrative delineate the total operational cost for the program for Year 1 and Year 2 (existing + expansion costs).